

GUIDAINCE IN THE SCHOOL OF
NURSING: A SUGGESTED IN-SERVICE
PROGRAM FOR FACULTY MEMBERS

Garrigan

1947

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GUIDANCE IN THE SCHOOL OF NURSING:
A SUGGESTED IN-SERVICE PROGRAM
FOR FACULTY MEMBERS

Submitted by

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(B.S., Columbia University, 1941)

In partial fulfillment of requirements for
the degree of Master of Education

1947

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CONTENTS

CHAPTER	PAGE
I. THE PROBLEM AND ITS SIGNIFICANCE.....	1
Background of the Problem.....	1
Statement of the Problem.....	4
Summary Statement.....	6
The Need for Guidance in Nursing.....	7
Underlying Principles Necessary for Guidance	11
Issues Involved in Planning for Guidance....	13
II. METHOD OF STUDY.....	15
Advances Pertinent to the Development of Guidance in Schools of Nursing.....	15
Report of Questionnaire.....	27
III. A SUGGESTED IN-SERVICE PROGRAM FOR FACULTY MEMBERS IN A SCHOOL OF NURSING.....	41
Introduction.....	41
General Objectives of Program.....	43
Objectives.....	43
Overview.....	44
Techniques for Discovering Needs, Interests, and Problems of Individual Students.....	45
Approaches.....	45
Evaluation Techniques.....	47
Resources.....	48
Plan for Instructor.....	49
Student Material.....	68

CONTENTS

CHAPTER

1	I. THE PROBLEM AND ITS SIGNIFICANCE.....
1	Background of the Problem.....
4	Statement of the Problem.....
5	Summary Statement.....
7	Justification for the Study.....
11	Underlying Principles Necessary for Guidance.....
12	Issues Involved in Planning for Guidance.....
13	II. METHOD OF STUDY.....
15	Advances Pertinent to the Development of Guidance in Schools of Nursing.....
20	Report of Investigation.....
21	III. A SUMMARY OF THE PROGRAM FOR NURSING STUDENTS IN A SCHOOL OF NURSING.....
21	Introduction.....
22	General Objectives of Program.....
23	Objectives.....
24	Curriculum.....
25	Techniques for Allocating Faculty, Materials, and Facilities to Individual Students.....
26	Appointments.....
27	Evaluation Techniques.....
28	Summary.....
29	Plan for Instructor.....
30	Subject Material.....

CHAPTER	PAGE
IV. CONCLUSIONS AND RECOMMENDATIONS.....	86
Conclusion.....	86
Recommendations for Further Study.....	88
BIBLIOGRAPHY.....	89

The modern concept of nursing has developed within the last three-quarters of a century and nursing today is still in the evolutionary throes of an emerging profession. The "growing pains" are particularly intense at this time because of economic disturbances. The advance of the labor movement in nursing, an increased number of qualified nurses who are rightfully striving for professional recognition, and the general unrest of the world.

Nursing, as a profession, is faced with many problems. One of these problems is the two-sided issue which involves carrying on with nurses prepared in the old school of thought by the use of the "static" curriculum which emphasized the skills of nursing, and at the same time selecting and preparing nurses according to the new philosophy of nursing education which emphasizes teaching by principles and progressive curriculum based on the "developmental aim." At first inspection this appears to be a problem common to all fields. In the field of nursing, however, it is a problem of special importance because of the nature of the work. The National League of Nursing Education, 1934-1935, New York, 1937, p. 1.

IV. CONCLUSIONS AND RECOMMENDATIONS.....	88
Conclusions.....	88
Recommendations for Further Study.....	88
BIBLIOGRAPHY.....	89

CHAPTER I

THE PROBLEM AND ITS SIGNIFICANCE

Background of the Problem

The modern concept of nursing has developed within the last three-quarters of a century and nursing today is still in the evolutional throes of an emerging profession. The "growing pains" are particularly intense at this time because of economic disturbances, the advance of the labor movement in America, an increased number of qualified nurses who are rightfully striving for professional recognition, and the general unrest of the world.

Nursing, as a profession, is faced with many problems. One of these problems is the two-sided issue which involves carrying on with nurses prepared in the old school of thought by the use of the "static" curriculum which emphasized the skills of nursing, and at the same time selecting and preparing nurses according to the new philosophy of nursing education which encourages teaching by principles and progressive curriculum based on the "Adjustment Aim."^{1/} At first inspection this appears to be a problem common to all fields. An

^{1/}Curriculum Guide for Schools of Nursing, National League of Nursing Education, 1790 Broadway, New York, 1937, pp. 1-31.

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examination of this statement as applied to nursing, however, reveals a much more serious situation because many nursing schools are operated on a combined service-educational basis rather than for strictly educational purposes.

Nursing needs have changed within the past half century. The importance of nursing in the social structure has begun to be recognized. The swiftly changing social order requires that the technical skills of nursing be based on broader knowledge of biological, physical, and social sciences. Total patient care and understanding of the whole personality is one of the foremost aims. Nurse educators are and have been working tirelessly to change the "training of nurses" to the "education of nurses." The majority of the 371,066 nurses in the United States ^{1/} have received a training which is highly vocational in character. Through no fault of their own, many nurses are highly trained in manual skills but are without a broad educational background. The effects of the mushroom growth of nursing schools as a source of inexpensive and controlled hospital labor are with us yet. Since hospitals still support and control about 90 per cent of our schools of nursing, ^{2/} too often their goals of education are set up and guided by their own graduates.

1/Facts about Nursing, 1945, prepared by the Nursing Information Bureau of the American Nurses Association, cooperating with the National League of Nursing Education and the National Organization for Public Health Nursing, New York, pp. 34-40.

2/Ibid.

examination of this statement as applied to nursing, however, reveals a much more serious situation because many nursing schools are operated on a combined service-educational basis rather than for strictly educational purposes.

Nursing needs have changed within the past half century. The importance of nursing in the social structure has begun to be recognized. The rapidly changing social order requires that the technical skills of nursing be based on broader knowledge of biology, psychology, and social sciences. Total patient care and understanding of the whole personality is one of the foremost aims. Nurse educators are and have been working tirelessly to change the training of nurses to the "education of nurses." The majority of the 571,000 nurses in the United States have received a training which is highly vocational in character. Through no fault of their own, many nurses are highly trained in manual skills but are without a broad educational background. The effects of the rapid growth of nursing schools as a source of technicians and controlled hospital labor are with us yet. While hospitals still report and control about 50 per cent of our schools of nursing, too often their goals of education are set up and guided by their own premises.

This report was prepared by the National Institute of Nursing Education, a division of the American Association of Colleges of Nursing, in cooperation with the National League of Nursing Education and the National Organization for Public Health Nursing, New York, N.Y. 100-40.

Ideals and aims are essential to growth but constant evaluation and a series of short term plans for improvements (based on a beginning at present levels) are stepping stones to the fulfillment of any long term plan or purpose. With the non-ideal, but known, situation in mind then, methods of progress within one's scope of activity must be considered.

The Curriculum Guide for Schools of Nursing states that nursing schools owe more to their students than graduation as a nurse eligible for licensing.^{1/} They should also prepare them to function as socially conscious citizens capable of self-direction because they are aware of their capabilities, strengths, weaknesses, and opportunities and are personally and educationally fitted for their work. The "guidance" responsibilities of nursing education have recently been given greater emphasis but the importance of any organized and identifiable program as an integrated part of the curriculum is not fully realized. Most schools claim a program of guidance, but closer inspection usually reveals a "hit or miss" arrangement or method aimed at producing results in light of organizational gain, rather than with the individual's welfare and growth in mind.

1/Curriculum Guide for Schools of Nursing, p. 19.

Statement of the Problem

How can a guidance point of view be introduced and developed in a school of nursing? There are several approaches easily discernible and many others yet to be pioneered. The most usual approach for the introduction of new programs and the maintenance of professional growth has been through the in-service staff education program. This approach will be analyzed in the following pages.

In this suggested "In-Service Program" general instruction in guidance will be followed by meetings of specialized groups within the class, e.g., Clinical Instructors, Classroom Instructors, Head Nurses. Each group will select problems in guidance in the area with which they are most familiar and concerned. They will report to the entire group. As a whole the group will endeavor to identify and introduce guidance activities into the school curricular and extra-curricular program. The outcome of the program should be greater interest and insight into students' personal needs and a desire for further knowledge by the faculty member.

There are other methods of introduction and approaches to the problem that can be going on simultaneously with the in-service program that accents guidance. These would include the following:

1. Nursing, as a profession, should be properly presented and included in the vocational guidance programs in high

Electrograph

schools and colleges throughout the country. Up-to-date material should be furnished to all vocational counselors so that they may have a proper understanding of type of characteristics and other qualifications desirable in prospective nursing candidates. Students who enter nursing schools from secondary schools and colleges that have active vocational and general guidance programs will be fairly well-purposed and on the way to self-direction. An increased amount of joint activity between these schools and nursing is desirable.

2. High school programs should be strengthened by more positive accents on health. A well-qualified nurse should be considered a member of the faculty and her duties should include the teaching of health, home nursing, and pre-nursing courses. She should be qualified to act as counselor for tentative or prospective nursing candidates and should be able to guide them educationally and vocationally. The school nurse can be one of the key people in a guidance program, and the health program one of the important units of guidance. This is an area in education that demands attention and combined effort on the part of both educators and nurses.

3. Within the nursing school, faculty members should be urged to obtain further preparation in the field of guidance at local universities.

4. The formation of adequate personnel policies within a hospital and school can do much to encourage the development

schools and colleges throughout the country. Up-to-date material should be furnished to all vocational counselors so that they may have a proper understanding of type of characteristics and other qualifications desirable in prospective nursing candidates. Students who enter nursing schools from secondary schools and colleges that have active vocational and general guidance programs will be fairly well-prepared and on the way to self-direction. An increased amount of joint activity between these schools and nursing is desirable.

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4. Within the existing school, faculty members should be urged to obtain further preparation in the field of guidance as local universities.

5. The formation of a guide, advisory committee with a hospital and similar agencies to coordinate the development

of a guidance point of view. This is particularly true when they allow for the continued professional growth and development of their staff members.

5. The placement and follow-up of drop-outs and graduates is an important area that must be given consideration.

Summary Statement

Guidance is a project for all. It cannot be superimposed but must be developed from within. It is of utmost importance that teachers and students have a similar point of view, a like philosophy, a mutual respect, and a desire to attain a common goal. A guidance program should not be based on a need felt by the student. Ideally a guidance program should serve as a "preventive measure" that aims to foresee and avoid difficulties of an educational, vocational, personal, or social nature; it should be a "sustaining device" to maintain, measure, and assure progress in growth, development, and accomplishment toward goals; it should be a "curative technique" to help people to clarify and solve their problems; and an "inspirational plan" that will help establish security, belongingness, a desire to participate, create mutual and self-respect, and help all those concerned to develop a greater tolerance, understanding, and appreciation of people and life.

of a religious point of view. This is particularly true when they differ from the established traditional growth and development of their small numbers.

5. The placement and follow-up of group work and exercises is an important area that must be given consideration.

Summary Statement

Religion is a project for all. It cannot be superimposed on one who is not involved from within. It is of utmost importance that teachers and students have a similar point of view, a like philosophy, a mutual respect, and a desire to attain a common goal. A religious program should not be based on a need felt by the student. Ideally a religious program should serve as a "preventive measure" that also is to foster and create a differentiation of an educational, vocational, personal, or social nature; it should be a "sustaining device" to maintain, enhance, and assure progress in growth, development, and accomplishment toward goals. It should be a "creative technique" to help people to clarify and solve their problems; and an "inspirational plan" that will help establish security, development, a desire to participate, provide actual and self-respect, and help all those concerned to develop a greater tolerance, understanding, and appreciation of people and life.

The Need for Guidance in Nursing

The need for more definite "guidance" in nursing can be demonstrated to some extent by the following facts:

1. The high drop-out rate in nursing schools. ^{1/}

(estimated at 29 per cent in 1945)

2. The lack of knowledge and concern of what becomes of these drop-outs.

3. The increased enrollments in the schools of nursing. ^{2/}

(1935--67,533 students in 1472 nursing schools)

(1945--126,576 students in 1295 nursing schools)

4. The age of the average student nurse is from 17 to 21 years. ^{3/}

The majority of schools set 17-19 years as the age for entrance.

Clark's report of the study of occupations in the United States reports the average age of the new graduate as

21 years. ^{4/}

It should be borne in mind that the majority of students enter the school directly from high school

1/Facts about Nursing, 1945.

"Student Withdrawals," Dept. of Studies, National League of Nursing Education, American Journal of Nursing (June, 1944), 44: 586-587.

2/Facts about Nursing, 1945.

3/Harold F. Clark, Life Earnings in Selected Occupations in the U.S., Harper and Brothers, New York, 1937, pp. 313-332.

4/Ibid.

The Need for Guidance in Nursing

The need for more definite "guidance" in nursing can

be demonstrated to some extent by the following facts:

1. The high drop-out rate in nursing schools.

(estimated at 25 per cent in 1942)

2. The lack of knowledge and concern of what happens to those

drop-outs.

3. The increased enrollments in the schools of nursing.

(1935-36, 27,523 students in 147 nursing schools)

(1942-43, 32,879 students in 158 nursing schools)

4. The age of the average student nurse is from 17 to 21

years.

The majority of students are 17-19 years of age for

entrance.

Chief's report of the study of occupations in the United

States reports the average age of the new graduate as

21 years.

It should be borne in mind that the majority of

students enter the school directly from high school.

1. Facts about Nursing, 1942

"Student Nurse, 1942", Report of Education, National League of
Nursing Education, American Journal of Nursing (June 1942)
44: 525-527

2. Facts about Nursing, 1942

Statistic L. Chief, U.S. Department of Education
The U.S. Bureau of Education, New York, 1942, pp. 213-232

3. Facts

or early college and live and work at the hospital for three years. These are the golden years of the adolescent. The average student is idealistic and eager to serve. She is at a period of greatest need and adaptability for guidance toward self-direction.

5. The increased public recognition of the need for nurses and the decreased enrollment of student nurses in 1946. (A decrease of the total amount reported for last year.) This decrease may be attributed to the withdrawal of federal aid, the general "let-down" after the war and the less attractive economic and social aspect of nursing as a profession at this time. Americans seem to be swayed toward judging vocations not by the contribution it makes to the social welfare, but by the amount of money that it returns for effort expended.
6. The increased fields of specialization within nursing, e.g., industrial nursing, prepaid nursing insurance plans, geriatrics, veteran and rehabilitation work, community and nurse education in foreign countries, psychiatric nursing. In these and the other areas of nursing the demands and responsibilities placed upon nurses are much greater.
7. The development of the research aspect of nursing.

This is further evidenced by the Committee of Research

1/A Search for More Exact Measures of Reliability and Efficiency in Nursing Procedures, The Nursing Education Bulletin #1, 1930, Teachers College, Columbia University, New York.

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1. A Report for the United States of America, by the Committee of Research
on the Nursing Profession, The American Association of Colleges of
Nursing, 1930, Teachers College, Columbia University, New York.

in the American Nursing Association, Bureau of Information, Dept. of Studies in the National League of Nursing Education and activities in the Research Dept. of the United States Public Health Service.

8. The development of the test and measurement movement in nursing. ^{1/} This is shown further by the presence of a Nurse Testing Division in the Psychological Test Corporation and the many articles written by measurement authorities upon the subject of "Selection of Students for Nursing," ^{2/} and the advance of the testing movement in the National League of Nursing Education and in various universities.

9. The high drop-out rate of graduate nurses from nursing following the war. ^{3/}

10. The evident need for "esprit de corps" among graduate

^{1/}Ida B. Sommer, "The Pre-Nursing and Guidance Test Service," American Journal of Nursing (February, 1944), 44: 158-164.

"Information about the National League of Nursing Education Tests," American Journal of Nursing (April, 1946), 46: 252-253.

^{2/}E. G. Williamson, "Selection of the Student Nurse," Journal of Applied Psychology, 22: 119-131.

Edith M. Potts, "Testing Prospective Nurses," Occupations (March, 1945), 23: 328-334.

A. L. Crust, Ohio State Cooperative Testing Program in Nursing Education, Educational Resources Bulletin XVIII (February, 1939), pp. 31-39.

^{3/}S. H. McGuire, Dorothy W. Conrad, "Postwar Plans of Army and Navy Nurses," American Journal of Nursing (May, 1946), 46: 305-306.

in the American Nursing Association, Bureau of Information, Dept. of Education in the National League of Nursing Education and activities in the Research Dept. of the United States Public Health Service.

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9. The high drop-out rate of graduate nurses from nursing following the war.

10. The evidence used for "nursing as a career" among graduates
W. H. Bower, "The Nursing and Education Test Division,"
American Journal of Nursing (February, 1941), 41: 155-164.
 "Information about the National League of Nursing Education
Tests," American Journal of Nursing (April, 1940), 40: 229-230.
G. E. Williamson, "Selection of the Student Nurse," Journal
of Applied Psychology, 26: 119-121.
Walter W. Fries, "Testing Prospective Nurses," Geriatrics
(January, 1941), 43: 128-134.
A. L. Davis, "The Basic Cooperative Testing Program in
Nursing Education," Educational Research Bulletin VIII
(February, 1941), 40: 51-59.
E. A. Hughes, "Testing in Nursing," Nursing Times of May
and June 1940," American Journal of Nursing (May, 1940),
40: 203-208.

nurses. ^{1/}

11. The urgency of unrest among nurses characterized by the demand for more economic security and leadership toward solving personnel difficulties. ^{2/}
12. The need for continued teaching in hospitals to supplement training and promote professional growth. The Staff Education or In-Service Program is advocated by many hospitals and schools and much material has been written in this area. ^{3/}
13. The extended use of the subsidiary worker and the difficulties which arise between the professional and non-professional groups. ^{4/}
14. The absence of follow-up programs in nursing schools. The newly developed Counseling and Placement Program sponsored by the American Nurses' Association is part of the answer to this problem. ^{5/}

1/"The Views of Some Institutional Staff Nurses," American Journal of Nursing (May, 1946), 46: 284-286.

2/Mary I. Bogardus and others, "Are Nurses Unions Necessary?" The Modern Hospital (September, 1946), 67: 43-47.

3/"The Views of Some Institutional Staff Nurses."

4/Dorothy Demming, "Practical Nurses--A Professional Responsibility," American Journal of Nursing (January, 1944), 44: 36-44.

5/Oralind F. Triggs, "Counseling and Placement Service for Nurses," Occupations (January, 1946), 24: 211-213.

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11. The urgency of action among nurses characterized by the demand for more economic security and leadership toward solving personnel difficulties.

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The Views of Some Institutional Staff Nurses, "American Journal of Nursing" (May, 1946), 46: 884-886.

Henry I. Hurd and others, "Are Nurses Union Necessary?" The Modern Hospital (February, 1946), 67: 43-47.

The Views of Some Institutional Staff Nurses.

Josephine L. Smith, "Professional Nurses--A Professional Response," "American Journal of Nursing" (January, 1947), 47: 50-52.

Josephine L. Smith, "Counseling and Placement Service for Nurses," "Nursing" (January, 1946), 46: 211-215.

Underlying Principles Necessary for Guidance

There are certain underlying principles to be adhered to if a guidance program is to function in a school of nursing. They include:

1. There must be a unity of purpose by those administering the school. An enlightened, cooperative, and supporting school board and administration are essential. The faculty must be adequate, qualified, and cooperative. The students must be included in this unity of purpose and should be carefully selected and should understand the objectives of the school and the desired result for themselves. They should be well-purposed and anxious to accomplish the common goal.

2. All concerned must have a common understanding and acceptance of a broad definition of professional nursing and its goals, such as that given in the Curriculum Guide:

Nursing means health conservation in its widest sense, including the care of normal children and adults; the nursing and nurture of the mind and the spirit as well as the body; health education as well as ministrations to the sick; the care of the patients' environment, social as well as physical; and the health service to families and communities as well as to individuals.^{1/}

3. There should be mutual agreement and understanding of the written statement of objectives, purposes, and responsibilities accepted by the hospital or university when it operates a school of nursing. Desired outcomes should be

^{1/}Curriculum Guide for Schools of Nursing, National League of Nursing Education, 1790 Broadway, New York, 1937, p. 20.

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They include:

1. There must be a unity of purpose by those administering the school. An enlightened, cooperative, and sympathetic school board and administration are essential. The faculty must be adequate, qualified, and cooperative. The students must be included in this unity of purpose and should be carefully selected and should understand the objectives of the school and the desired results for themselves. They should be well-prepared and anxious to accomplish the common goals.
2. All concerned must have a common understanding and acceptance of a broad definition of professional nursing and its goals, such as that given in the Nursing Vision.

Nursing means health conservation in its widest sense, including the care of normal children and adults, the nursing and nurture of the blind and the crippled as well as the body, mental education as well as education in the field of the care of the patient, environment, social as well as physical, and the health service for families and communities as well as for individuals.

3. There should be mutual agreement and understanding of the written statement of objectives, purposes, and responsibilities accepted by the hospital or university when it operates a school of nursing. Desired outcomes should be
- Nursing Vision for Society, National League of Nursing Education, 1300 Broadway, New York, 1937, p. 80.

stated and means for measurement of attainment devised.^{1/}

Provision should be made for all to participate in the planning, functioning, and revision of school policies and programs.

4. Education rather than productive service to the hospital should be the primary purpose of the school and educational facilities for this purpose should be provided.

5. The philosophy of nursing education should be broad and accept the eventual self-direction of the student as one of its aims. All those concerned should understand guidance as a function aimed at helping the person to be self-directing. The measures used to reach the common goal should be concrete and not just lip-service about the desirability of such a program.

6. Provision should be made for recognition of individual differences.

7. The personnel policies of the organization should reflect the "guidance" viewpoint in many aspects which include those that stimulate growth of the faculty.

1/R. Louise McManus, Study Guide on Evaluation, National League of Nursing Education, 1790 Broadway, New York, 1937, p. 20.

Nursing Schools--Today and Tomorrow, Committee on the Grading of Nursing Schools, National League of Nursing Education, New York, 1934, pp. 67-78.

Issues Involved in Planning for Guidance

Questions and issues that come to mind when planning an organized program of guidance is considered, include:

1. What do we mean by a "professional nurse"? What knowledges, skills, and characteristics do we expect her to possess after graduation?
2. Can we select student nurses any more carefully?
 - a. What should be her intelligence level?
 - b. What kind of educational and social background history has produced the best nurses?
 - c. What of her achievement in previous schools?
 - d. What aptitudes and interests should she have?
 - e. Are there any definite interest patterns desirable or preferable in selecting a candidate for nursing?
 - f. What outstanding character and personality traits should she possess? How can we determine the presence of these?
 - g. What standards of mental, emotional, and physical health are essential?
3. How can all phases of student progress be evaluated during her educational years to determine the progress she is making toward known objectives?
4. Can and should such programs be carried out by individual schools?
5. Is there any real value in follow-up after graduation?
6. Does a profession have any responsibility of placement of its graduates?
7. What are the most usual types of problems that arise in the school of nursing and with young graduate nurses?

8. What are the problems of the hospital nurse?^{1/}

9. Does the education and work of a nurse encourage the presence of a static personality rather than develop a dynamic one?

Advances Pertinent to the Development of Guidance

In Schools of Nursing

Although there has always been some degree of effort made toward guidance in nursing, the acceptance of its importance as an integral part of nursing education is comparatively recent. In the Guidance Guide for Schools of Nursing, a bird's-eye view of the development of nursing education serves to set a background for present progress and aims toward organized guidance in nursing. Briefly, it is pointed out that the sixty odd years (written in 1932) since nursing schools were first established in America naturally divided itself into three periods. The first twenty years, those between 1875 and 1895, were years of pioneering; "hero" years such as the years between 1895 and 1915; and the period of critical inquiry and standard setting from 1915 to 1935. During the last years, as medical science advanced, the value of the nurse was recognized and the training of students became sounder and profitable. Every hospital wanted a

CHAPTER II

METHOD OF STUDY

Advances Pertinent to the Development of Guidance
in Schools of Nursing

Although there has always been some degree of effort made toward guidance in nursing, the acceptance of its importance as an integral part of nursing education is comparatively recent. In the Curriculum Guide for Schools of Nursing^{1/} a bird's-eye view of the development of nursing education serves to set a background for present progress and aims toward organized guidance in nursing. Briefly, it is pointed out that the sixty odd years (written in 1933) since nursing schools were first established in America naturally divides itself into three periods. The first twenty years, those between 1873 and 1893, were years of pioneering; "boom" years came in the years between 1893 and 1913; and the period of critical inquiry and standard setting from 1913 to 1933. During the boom years, as medical science advanced, the value of the nurse was recognized and the training of students became popular and profitable. Every hospital wanted a

1/Curriculum Guide for Schools of Nursing, Committee on Curriculum, New York, 1937.

school of its own. Although laws were passed to control the flagrant abuses, there remained wide variations in admission standards, programs of instruction, and also in the products of these schools. In 1917 the first standard curriculum guide was published. During the years that followed the facts and figures regarding nursing were collected and in 1927 the curriculum was revised. After further study of schools of nursing, the third revision was begun in 1933 and published in 1937. This curriculum was a result of the combined effort and study of nurse educators throughout the country. The philosophy of the curriculum centered about the "adjustment aim" which was described as the preparation of the student not only as a nurse and professional person, but as an individual fitted to live effectively. The importance of professional adjustment and extracurricular activities was stressed. The appointment of a person to be responsible for the extracurricular activities and personal development of the student was suggested. Admission standards suggested that a candidate for nursing should have one or two years preparation beyond high school; achievement that indicated the applicant ranked in the upper-third of her class in high school; that intelligence, scholastic aptitude, and personality tests be used in selection; that the admission age be raised to 20 years; that good health be present and that the character and background of the candidate be

thoroughly investigated. A personal interview was advised. The Curriculum Guide is a forward-looking instrument and has made a great contribution to the development of schools of nursing. It is still "advanced" so far as many of the present day schools are concerned.

The years since 1933 have been years of progress and recognition for the nursing profession. The following paragraphs will consider some of the literature and advances in nursing that deal with the development of a guidance point of view philosophy. The order of report will be in areas of selection of students, measurement and educational guidance, vocational guidance, counseling, health and welfare, and co-curricular activities.

For the assistance of schools of nursing with regard to the selection of students, the National League of Nursing Education has developed a set of admission and cumulative records that are available for purchase from the League Office of Publications.^{1/} The League also has a Pre-Nursing and Guidance Test Service in operation. In the fifty-first annual report of the Committee on Measurement and Educational Guidance^{2/} it was stated that twenty-one state committees were

1/A Guide to the Use of League Records, National League of Nursing Education, 1790 Broadway, New York.

2/Fifty-first Annual Report of the National League of Nursing Education, Report of Committee of Measurement and Educational Guidance, 1945.

actively cooperating in the Pre-Nursing and Guidance Test Services in their states. Many states have planned state meetings regarding the selection of students and are utilizing the materials of the Test Service as a basis for discussion. During 1944, 8254 candidates from eighteen states were tested and in 1945 up to the time of the report, 4000 more were tested in 185 schools in twenty-one states.

Potts of the Nurse Division of the Psychological Testing Corporation has also reported on tests for the admission of student nurses. After years of experience reports on value of scholastic aptitude are most reliable for students' selection. If score is in low percentile or decile, the student stands a 1-10 chance of graduating and passing state boards, while student whose score is in highest tenth stands 7-10 chance of doing so. There is enough material available now to base findings against scores of students who have actually graduated.

Other reports have been made with regard to the intelligence level of nursing students. One such was the study by Dr. Bregman^{1/} of 10,000 freshmen student nurses and their performance on nine types of intelligence tests. This study was made in 1933 and sponsored by the Nursing Division at Teachers College of Columbia University. The results revealed

1/Elise O. Bregman, The Performance of Student Nurses on Tests of Intelligence, Nursing Education Bulletin, Teachers College, Columbia University, New York, March, 1933.

that student nurses were approximately at the same level with college freshmen, but in the higher scores the college students were superior. McWilliams and Gordon made a similar study^{1/} in 1942 when they tested 242 prospective and first-year students by using the American Council on Education Psychological Test, 1939 form, and comparing the results with those obtained on college freshmen. The findings were similar to those of the 1933 study.

One of the most recent reports has been in regard to the use of the Kuder Preference Record as an instrument of counseling nurse and pre-nursing students.^{2/} Over 800 graduate professional nurses filled out the record and the resulting pattern revealed that nurses have a profile record significantly different from the general profile made by women in that it is higher in science and social areas for nurses. The differences within the areas of nursing were less pronounced and the most significant differences were in the field of public health nursing and teaching.

A well-planned survey of the practices of 100 nursing schools participating in the education of cadet nurses was made by the Research Department of the United States Public Health Service in 1945.^{3/} One of the many findings of the

^{1/}Alice McWilliams, Phoebe Gordon, "Entering Students vs. College Freshmen," American Journal of Nursing (December, 1942), 43: 1415-1417.

^{2/}"Kuder Preference Record in the Counseling of Nurses," American Journal of Nursing (Mar 1946), 46: 312-316.

^{3/}"Practices in Nursing School Health Programs--Report of 100 Schools," American Journal of Nursing (Sept., 1945), 45: 740-747.

study was that of the 100 miscellaneous schools, 77 schools gave intelligence tests, 22 gave psychological tests, and 10 per cent of the schools had guidance counselors with varying backgrounds. The majority of the schools reported guidance programs but nothing specific or inclusive was reported.

McManus, now Director of the Nursing Division at Teachers College, has been Chairman for the Committee on Measurement and Educational Guidance and has worked with the testing project from its beginnings. Besides pre-nursing and guidance materials the Test Service has available achievement tests in the areas of anatomy and physiology, chemistry, and microbiology that are available on a test-service basis. Under the auspices of the National League of Nursing Education, McManus has published The Study Guide to Evaluation.^{1/} This booklet was prepared to help interested but unprepared faculty groups to prepare valid tests for their own schools. She discusses clearly the organization of the study group, clarifies the concept of tests, presents characteristics of the standards-enforcement tests and tests for educational guidance. She describes the different types of tests and decisions regarding what is to be measured and which type test can best measure the desired area or ability. Types of questions and question constructions are discussed. In the Appendices of the book the author makes a tentative statement of desirable

^{1/}R. Louise McManus, The Study Guide to Evaluation, National League of Nursing Education, New York, 1944.

outcomes of the education program of a school of nursing and lists specifications for clinical nursing examinations.

As part of the effort to acquaint nurses with tests and measurements, Emma Spaney, statistician on the staff of the National League of Nursing Education Committee on Measurement and Educational Guidance, prepared an article for the American Journal of Nursing that explains some basic terms of the tests and measurements.^{1/} The nursing literature has shown a marked tendency to contain more of nursing course outlines and articles pertaining to grades and testing.

More attention has been given also to the vocational aspect of nursing. In 1935 Spaulding wrote a suggested outline for a vocational guidance program in schools of nursing.^{2/} In this study Spaulding pointed out the need for vocational guidance within nursing and pointed out over seventy-five capacities in which nurses serve the public and community. In 1939 she published her book on Professional Adjustments in Nursing.^{3/} This book is now widely used as a text in nursing schools.

In January, 1944 the State Board Test Pool was begun on

^{1/}Emma Spaney, "Some Basic Terms in Tests and Measurements," American Journal of Nursing (March, 1946), 46: 192-193.

^{2/}Eugenia K. Spaulding, A Suggested Vocational Guidance Program for Schools of Nursing, National League of Nursing Education, New York, 1935.

^{3/}Eugenia K. Spaulding, Professional Adjustments in Nursing, 2nd edition, J. B. Lippincott and Company, Philadelphia, 1941.

a test-service basis. During the year 8567 candidates were tested in twenty-three states.^{1/} Some states use all of the pool tests for state licensing, others used one or more selected tests. The members of the Test Pool consultants are from many parts of the country and the project is a cooperative.

The Test Service has also prepared a comprehensive test organized to measure basic and advanced school programs and for guidance of individual graduate nurses. The cooperative test service scores the tests and returns results to schools in about two weeks. The testing service is still in the fledgling stage but is growing stronger as the measurement movement goes forward in nursing.

The most detailed work in the area of counseling in nursing has been done by Triggs, who was Personnel Consultant on the staff of the American Nurses Association from 1944 until 1946. In 1945 her book Personnel Work in Schools of Nursing^{2/} was published. This is the first book of its kind to deal directly with nursing. The purpose of the book is to help prospective counselors of student nurses and to give clinical supervisors and classroom teachers some background knowledge to enable them to do the counseling necessary in

1/Fifty-first Annual Report of the National League of Nursing Education, Report of the Committee of Measurement and Educational Guidance, 1945.

2/Frances O. Triggs, Personnel Work in Schools of Nursing, W. F. Saunders Company, Philadelphia, 1945.

their work. The book deals with the bases of a counseling program and discusses first human behavior and adjustment. This first part is a review of the structural and physiological factors affecting learning and methods of adjustment. The second part of the book deals with the counseling program. The usual type of problems presented in a nursing school are discussed. There is a description of the characteristics that a counselor should possess and a discussion of the counseling process. Educational, personal, and vocational counseling with placement and follow-up are presented. The author describes to some extent the use of test results, the case history, the cumulative record, the anecdotal record, rating scales, and the interview. In Part III Dr. Triggs describes the use of standardized tests and includes a description of some tests that can be used in nursing. Part IV is given over to a case discussion. At the close of the book is a comprehensive bibliography on personnel work in nursing.

In 1945 Kelleher, in an unpublished thesis at Boston University School of Education, ^{1/} stated that there was little tangible material to serve as a practical guide for schools of nursing desiring to build a guidance program and no approved way for schools to evaluate what program they now have. In her study she proposed to set forth criteria for the

^{1/}Rita P. Kelleher, "Suggested Program of Guidance for Schools of Nursing," Unpublished master's thesis, Boston University School of Education, Boston, 1945.

evaluation of a minimum program of guidance in schools of nursing and to validate these criteria so far as possible. A check-list was constructed and sent to outstanding leaders in the field of guidance in schools of nursing to evaluate the practices in the check-list and from the consensus of their opinions the author determined the desirability of each item. Major findings and conclusions were: (1) It is evident that the judges consider the keeping of complete and adequate records an essential function of the program; (2) it is obvious that the raters consider "orientation" of the student a vital function of the guidance program; (3) the leaders agree that the provision of an adequate counseling service is necessary; (4) the majority approved the item with regard to placement which may be considered to indicate that placement is being recognized as a rightful function of schools of nursing; (5) the judges feel that follow-up activity should not be neglected. The author points out that placement, counseling, and follow-up are apparently the weak points in the school of nursing.

In an unpublished thesis written by Dill at Boston University School of Education ^{1/} in the spring of 1945, a study was made of over 300 student nurses' problems. The problems were located by means of the Morrison Problem Check List.

1/Madeline Dill, "Problems of Student Nurses," Unpublished master's thesis, Boston University School of Education, Boston, 1945.

Major problems were found in the social and recreation area. An analysis of all problems was made.

The health practices in schools of nursing have long been of great concern to hospitals and nursing educators. The effectiveness of such practices may be reflected in the health and well-being of the individual student, in the drop-outs due to illness, in the adjustment problem, and in the quality of nursing care given by the student. One of the most pertinent and summarizing studies made in the area of health programs in schools of nursing was reported in the American Journal of Nursing in September, 1945.^{1/} In this study it was decided not to take schools which were known to have good programs but to study a sample which would be representative of schools of all geographic areas and sizes. A sample was taken of one hundred schools with a total student body of 9,865. The information for analysis was checked by personal interview. The information collected included such material as hours of duty, vacation and sick-time allowance, average sick time, health service physician and nurse, laboratory examinations, pre-entrance examinations, physical examinations, immunization, health records, classes in personal hygiene, physical education, diet plan and facilities, fire hazards, tuberculosis hazards, and mental hygiene provisions.

^{1/}"Practices in School Health Programs," United States Public Health Service Department of Research, American Journal of Nursing (September, 1945), 45: 740-747.

The major findings indicated that schools have many varied types of health programs and that there is a need for standardization on an uniformly high level.

Student government and the importance of extracurricular activities have received a great deal of attention in the past twenty years. The advisability of community participation has come to the foreground for consideration. Bernays' report of "Nursing and Community Groups"^{1/} reveals that although nurses have the good will of organizations for the most part, this is not based on knowledge because as a rule nurses have not shared in the life of the community.

The general opinion is that nurses should be less of a closed group. This trend of thought is emphasized by the number of articles in professional journals regarding the personal development of nurses. Failures in this area are supported by many of the current articles written by staff nurses.

The over-all acceptance of the guidance and personnel point of view as a "must" in schools of nursing is brought out again by the fact that five advanced schools of nursing education are offering courses in this area.

1/E. L. Bernays, "Nursing and Community Groups," American Journal of Nursing (April, 1946), 46: 291-300.

Report of Questionnaire

In order to determine by firsthand experience the need for guidance among nurses a questionnaire was prepared to gather information with regard to nurses' problems and their attitudes and opinions of nursing.

Scope and limitations of the study:

1. The questionnaire contained 81 questions. These questions were taken from areas of (a) background: personal and professional; (b) opinions and attitudes: general, personal, and professional; (c) information with regard to present position; and (d) information regarding future plans.
2. The questionnaire was distributed to 175 graduate nurses serving in the Army Nurse Corps in a general hospital in the United States. Of the total number of questionnaires distributed 146 were returned completed.
3. The questionnaire was distributed during the last week of June, 1946.

Procedure:

1. Permission was granted by the principal chief nurse and hospital authorities for the study to be made.
2. There was no identification required and an explanation of the questionnaire pointed out that

- we were interested in the sincere opinion of nurses about nursing.
3. The questionnaires were distributed and collected on a purely voluntary basis. When the questionnaire was completed it was in most instances placed in a plain envelope and sent to the chief nurse's office by means of the regular hospital messenger service. This eliminated any curtailment of free expression.
 4. The questions were originally prepared to cover the areas described in (1) under scope, but were then purposely mixed up in order on the questionnaire so that a biographical pattern was not too evident and one answer was less likely to be affected by preceding ones.
 5. Results of the returned questionnaires are reported in a graphic form. The answers are represented by horizontal bars. Each small square equals one reply. The dark line through the score marks the median or mid-point of the total number of questionnaires issued.

Major findings, limitations, and conclusions:

1. The results indicate a readiness on the part of nurses to criticize organization activities and leaders but a failure to attend or to participate in professional meetings.

2. Seventy-one per cent of the nurses had no plan for retirement. Twenty-six per cent report such a plan but Question 81 reveals that an almost like percentage plan to stay in the Federal services and this would seem to indicate their plan for retirement.
3. Forty-nine per cent report they support someone besides themselves. This answer may have been influenced by the fact that the Army makes extra allowance for the support of dependents.
4. Thirty-four of the nurses have never "kept house." This indicates to some extent that there is extra need for stress on family care and community relations, budgeting, preparation and cost of food, etc., in nursing education.
5. Twenty-six per cent admit some religious prejudices while 35 per cent admit racial prejudice. This may be influenced by the presence of many negro nurses living in the non-segregated nurses' quarters (a new experience for many), the presence of Southern nurses, and the unfortunate experiences of the nurses who had been in the South Pacific area with the negro troops.
6. The majority of nurses profess strong religious beliefs and practice of religion.

7. The attendance at movies seems high but may be due to the Army influence of low-cost performances. This hospital was less than one hour from New York City however.
8. The description of themselves chosen by the majority that reads "serious, pleasant, responsible, active, conservative in dress, and ambitious" describes nurses very well. The majority would pay ten to fifteen dollars for a daytime dress. Few read fashion magazines.
9. Examination of hobbies and talents seemed to indicate a significant absence, although more than 50 per cent could typewrite.
10. Few belonged to non-professional organizations (about 20 per cent).
11. Answers seemed to indicate dissatisfaction with nursing. The answers to #30 in which 43 per cent replied that they did not think the average person respects the nurse as a professional person emphasized our need for a strong morale building and public relations program. Forty-four per cent said they thought the average person interpreted nursing as a group of manual skills or a type of house-keeping. Thirty-six per cent were not proud of the average bedside nurse as a representative of

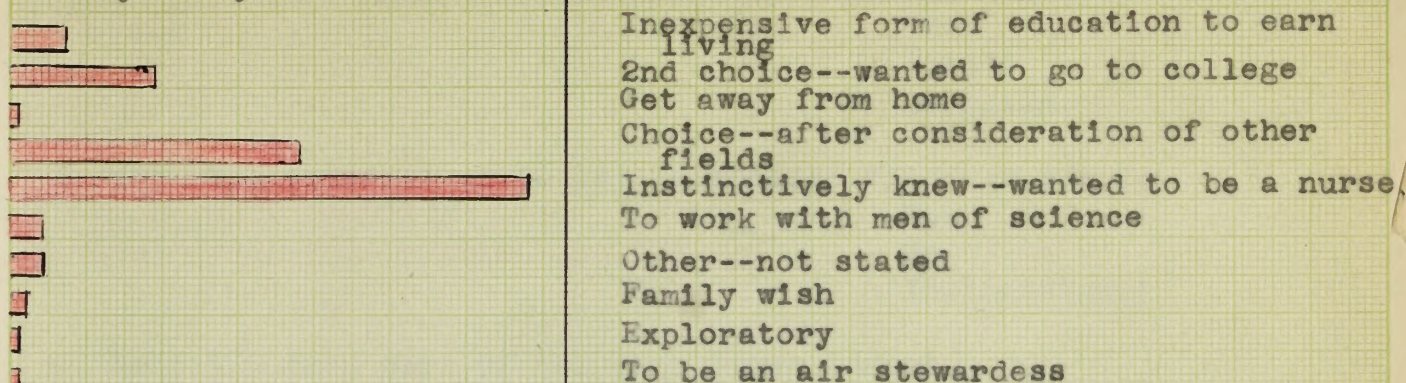
the nursing profession.

12. Ninety per cent say salaries for nurses are not high enough.
13. Twenty-nine per cent of the nurses questioned said they thought nurses should belong to unions.
14. The consideration given "R.N." (a professional magazine) seems to indicate a low level of reading appreciation for a professional group. The reading of professional journals is limited. Less than half have established the habit of keeping up-to-date on professional progress.
15. The recent reports of the exodus of Army nurses from nursing is substantiated with the main reason for leaving being marriage and homemaking.
16. Reports show that although this study considers a small group it would seem to be a good sampling because of the good distribution of areas, backgrounds, experiences, and preparations of those participating.

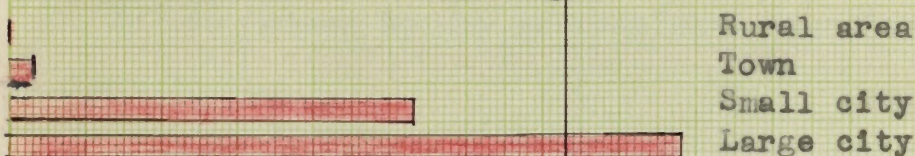
In general the results seemed to reinforce the impression gathered during actual association with many graduate nurses. It was thought important to verify and report because information from the "roots" has a different character than that collected and presented by people in key positions or those not working actively with the staff group. The following pages are a graphic report of the answers received.

I.

1. Why did you decide to become a nurse?



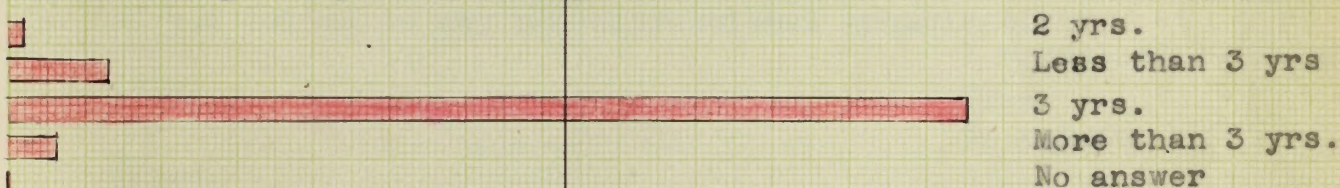
2. Was the school of nursing in which you trained in



3. How many affiliations did you have?



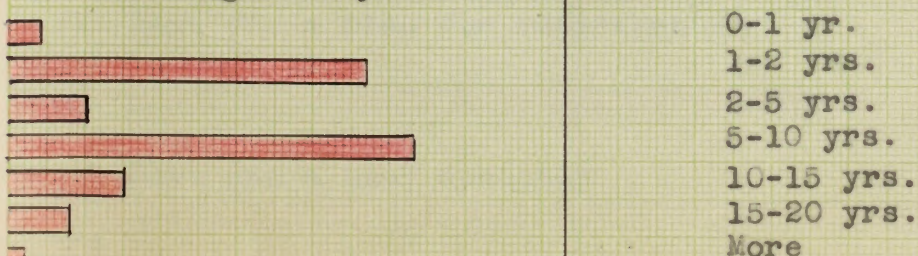
4. How long was your training?



5. What was bed capacity of hospital in which you trained?



6. How long have you been out of training?



Vertical line indicates mid-point of total returns.

7. How much of this time have you been engaged in nursing practice?

All
Most
Little
No answer

8. Have you specialized in any particular field or area?

Yes
No
Institutional

9. Were you ever part of the Army Nurse Corps?

Yes
No

10. Do you belong to any professional organizations?

A.N.A.
N.L.N.E.
N.O.P.H.N.
Alumni
State
None or No ans.

11. Do you attend professional meetings?

Always
Often
Seldom
Never

If never--why not: No opportunity--In service--Too far from home--Lost interest

II. 12. Do you belong to any non-professional organization?

1 organization or more
None
No answer

Types:

13. Are you a citizen?

Birth
Naturali-
zation

14. Were your parents born in the U.S.?

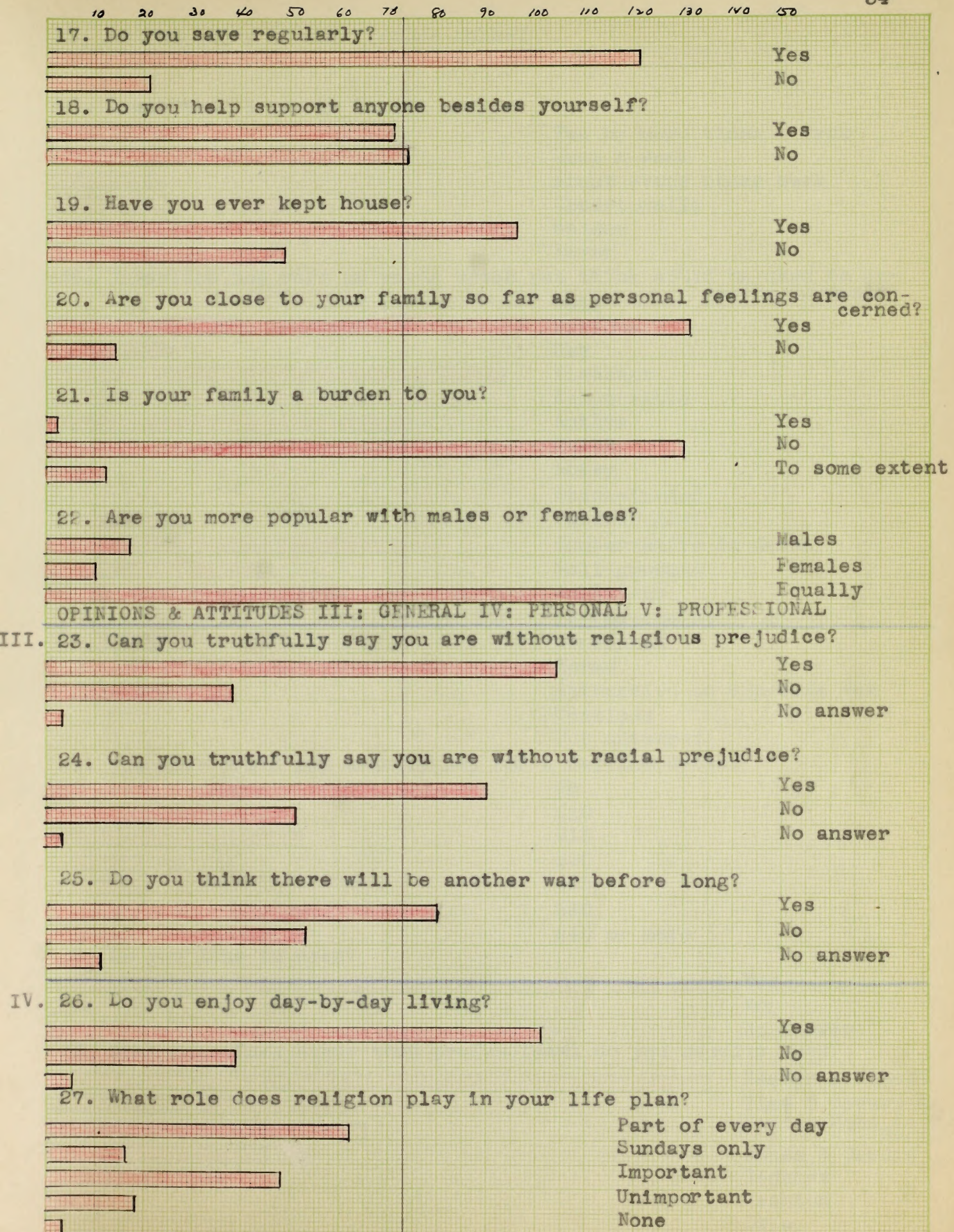
Yes
No
One

15. Have you a plan for retirement?

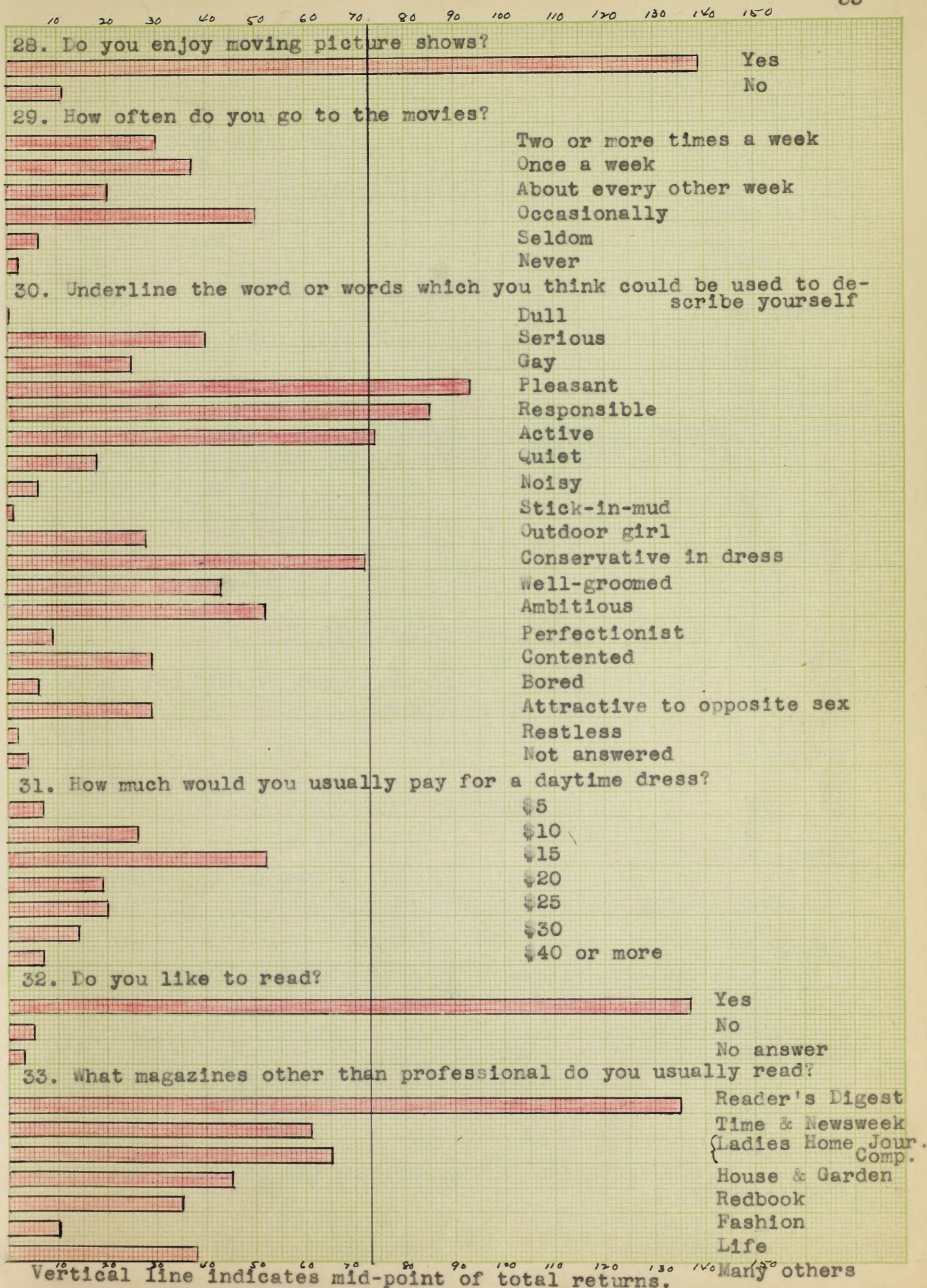
Yes
No

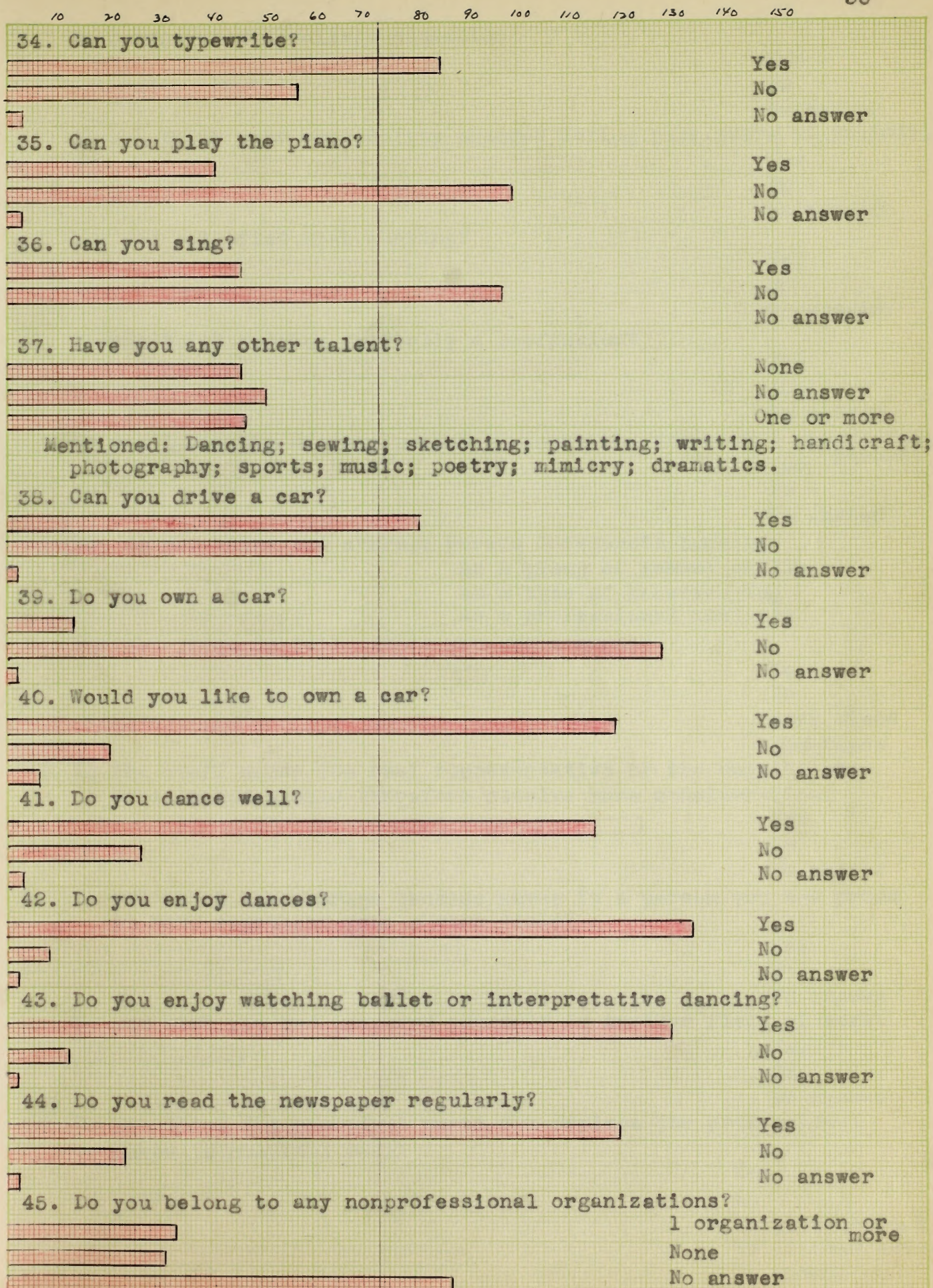
16. Have you a bank account?

Yes
No



Vertical line indicates mid-point of total returns.





10 20 30 40 50 60 70 80 90 100 110 120 130 140 150

RECEIVED
JAN 10 1900

THE
OFFICE OF THE
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OF THE
UNITED STATES

DEPARTMENT OF THE
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WASHINGTON

NOV 10 1899

TO THE
COMMISSIONER

OF THE
LAND OFFICE

WASHINGTON

DEPT. OF THE
INTERIOR

WASHINGTON

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10 20 30 40 50 60 70 80 90 100 110 120 130 140 150

V.

46. Do nurses need a college education?

Yes

No

No answer

47. Do you think your personality changed during your years of training?

Yes

No

No answer

48. Are you satisfied with nursing?

Yes

No

No answer

49. Do you think nursing is really a profession?

Yes

No

No answer

50. Do you think the average person respects the nurse as a professional person?

Yes

No

No answer

51. How do you think the average person interprets nursing?

As a group of manual skills

As a type of housekeeping

As a professional activity

52. Are you proud to tell people you are a nurse?

Yes

No

Most times

Sometimes

53. Is the staff nurse the real representative of the nursing profession and should therefore receive more consideration?

Yes

No

No answer

54. Do you think the average bedside nurse is a person you are proud to have represent your chosen field?

Yes

No

No answer

55. Do you wish you had prepared yourself in another field of work?

Yes

No

No answer

56. Do you think the practical nurse can replace the professional nurse in hospital work?

Yes

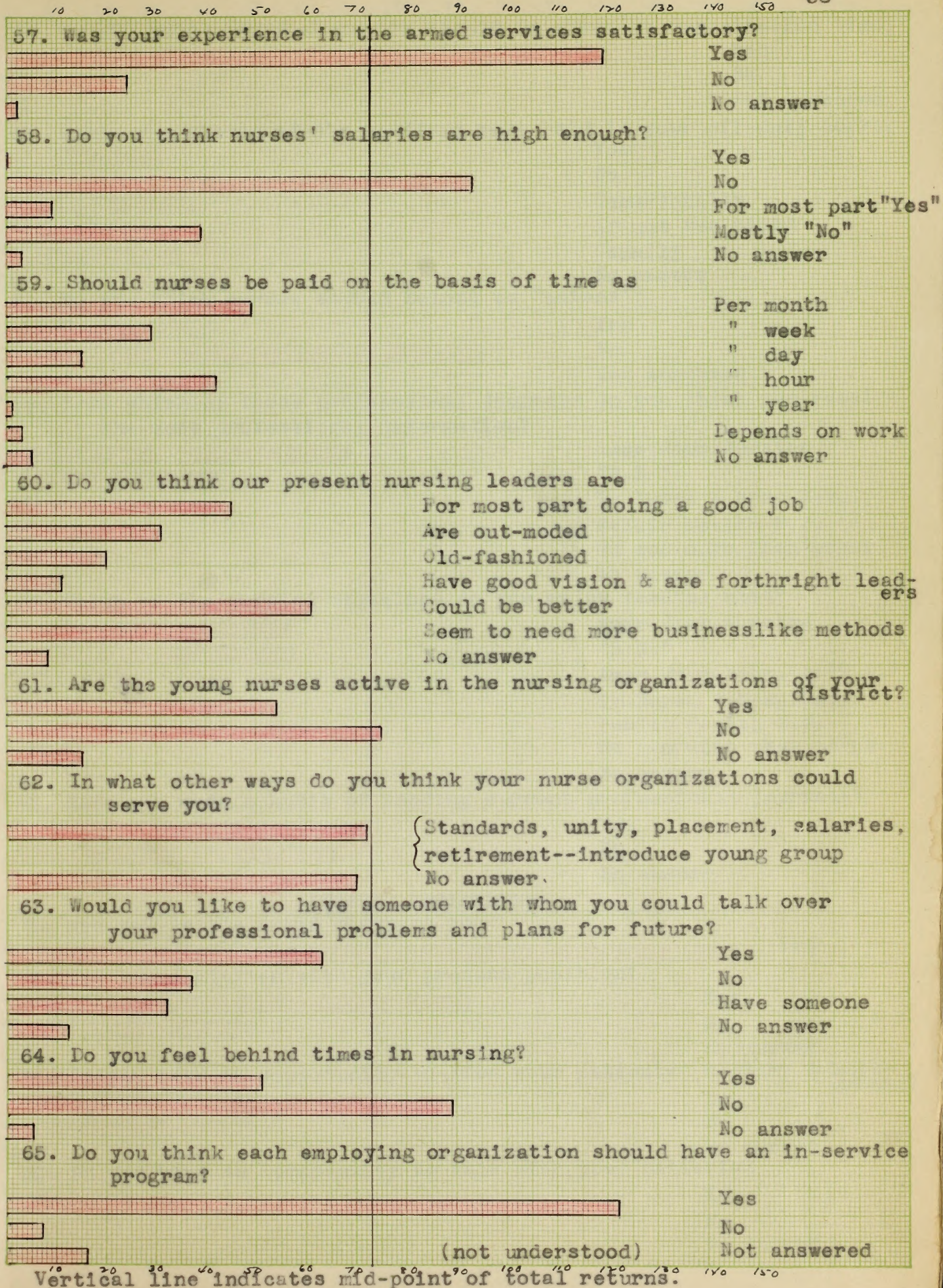
No

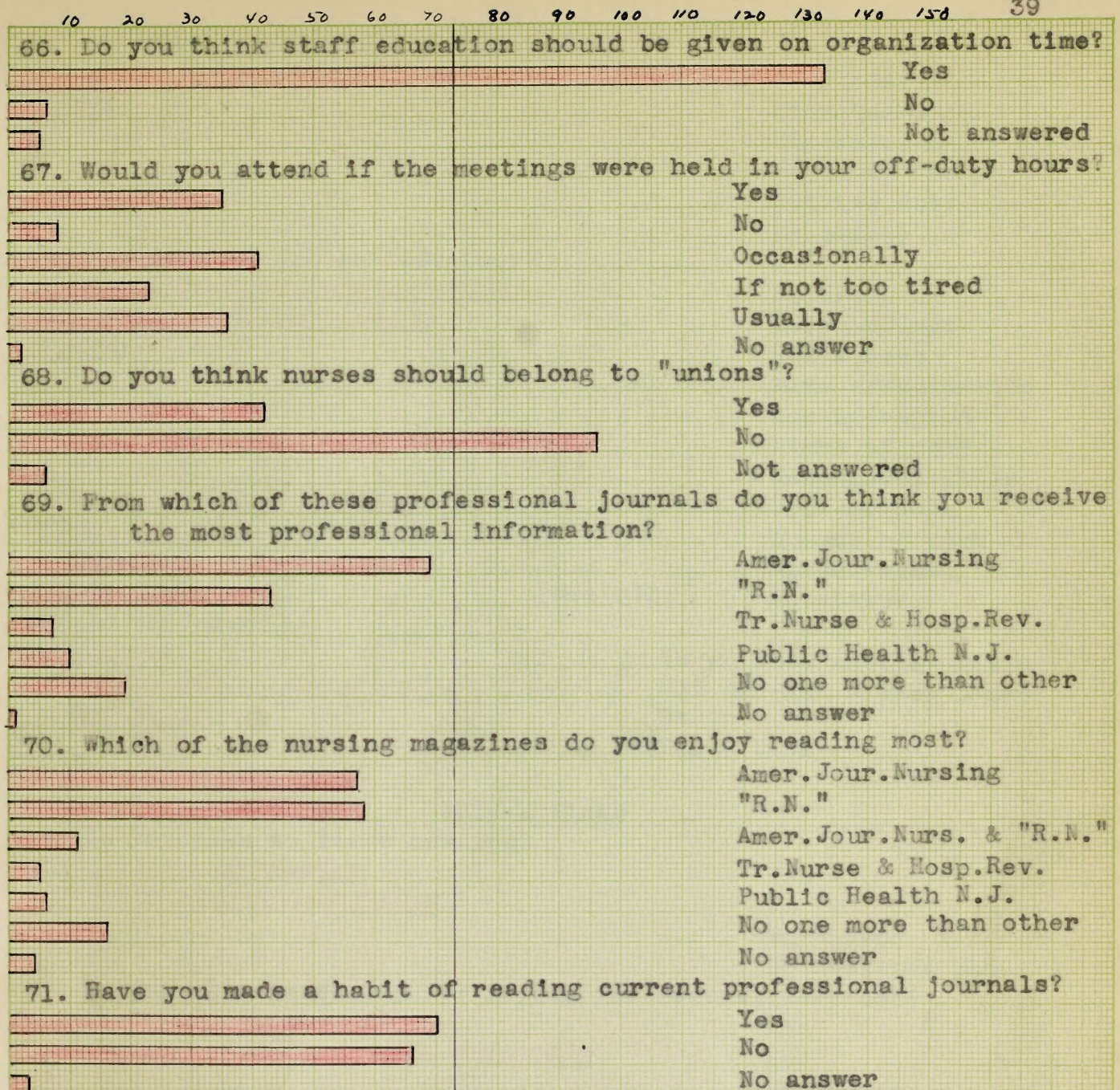
To great extent

To limited extent

No answer

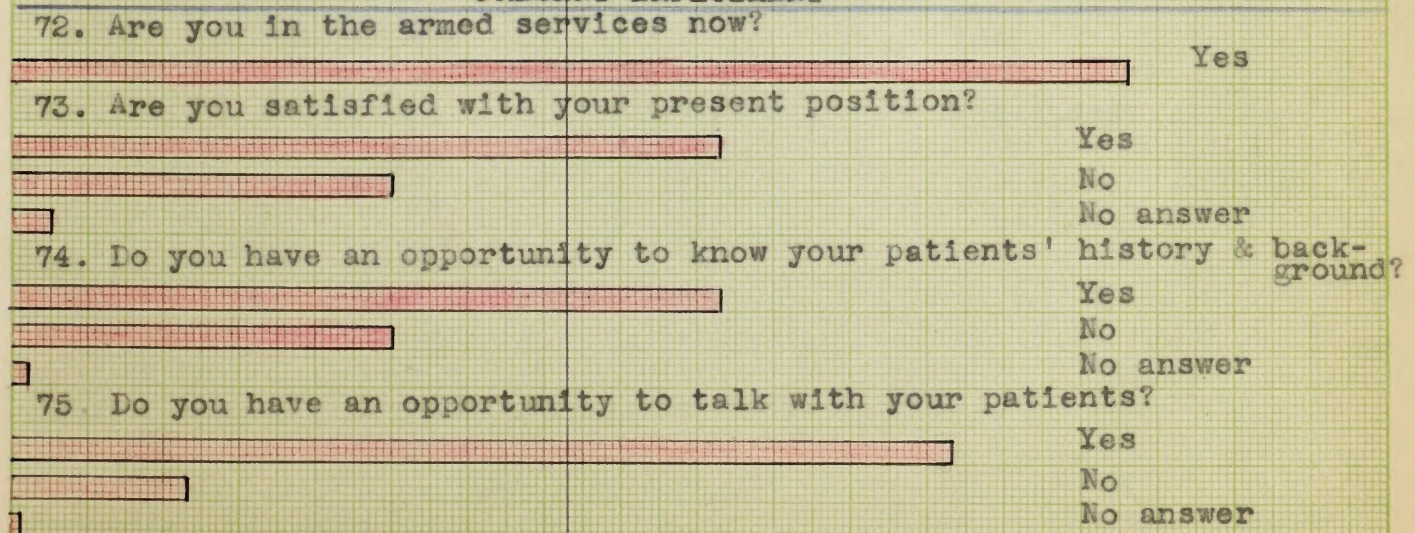
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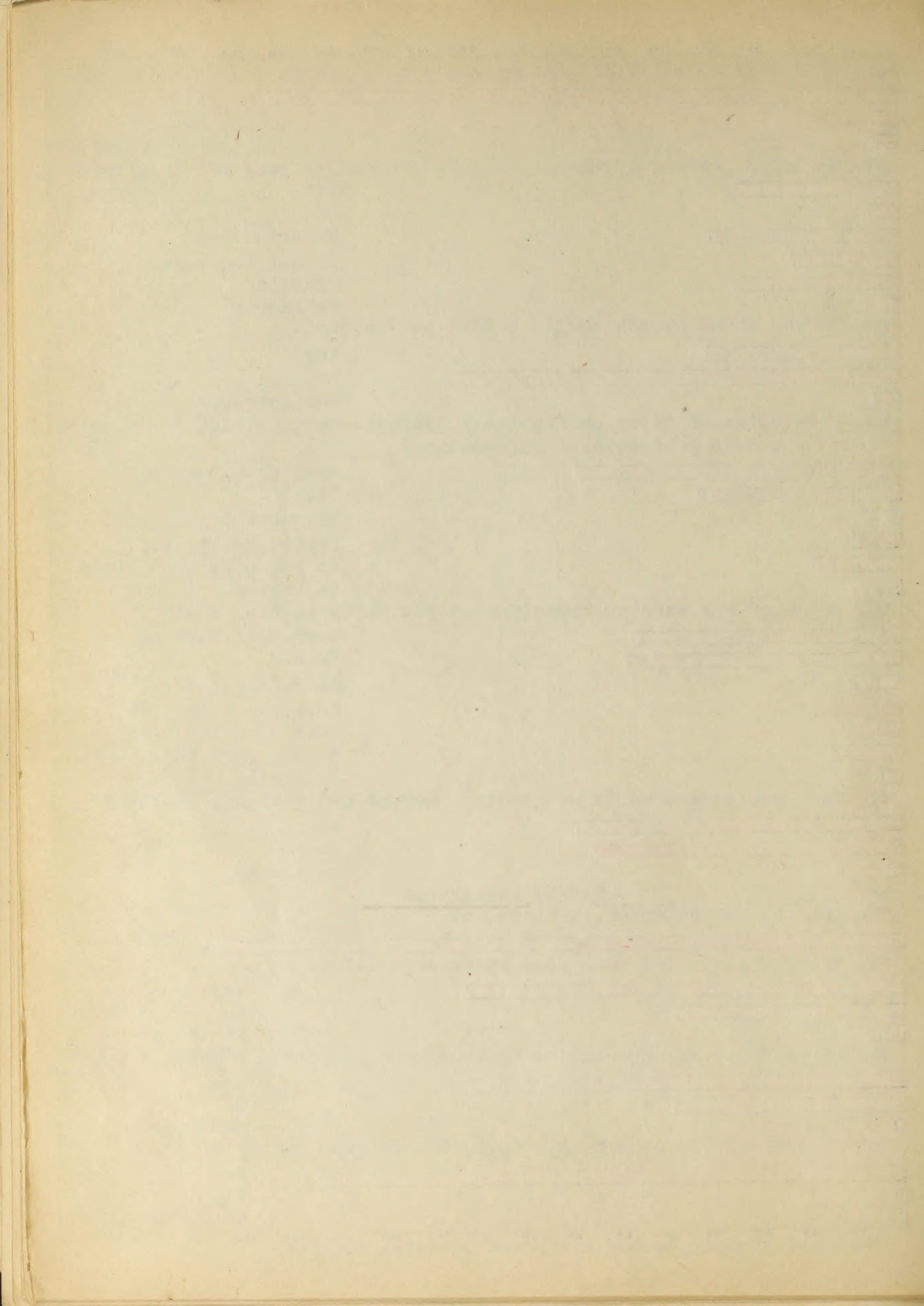


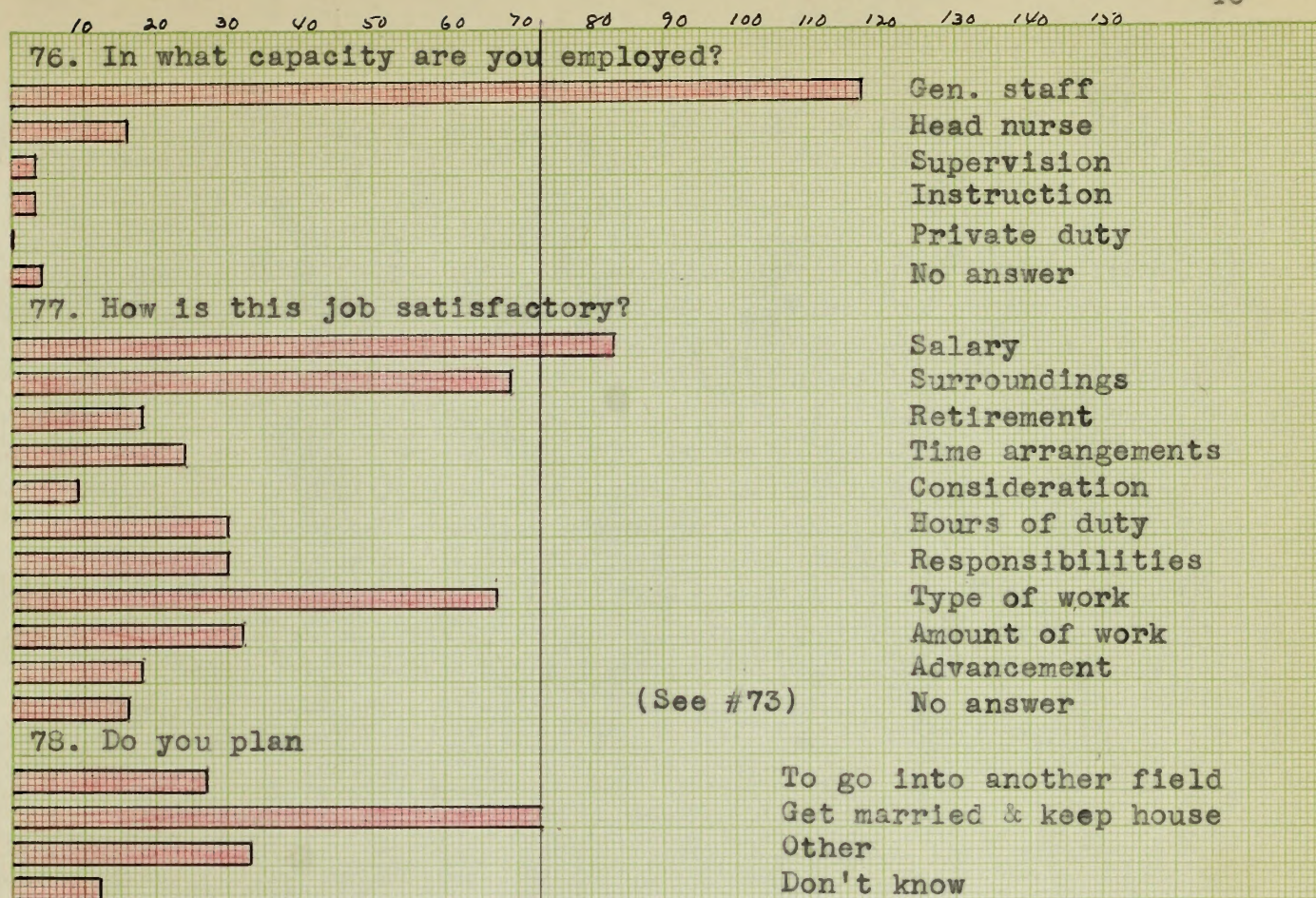
VI.

PRESENT EMPLOYMENT



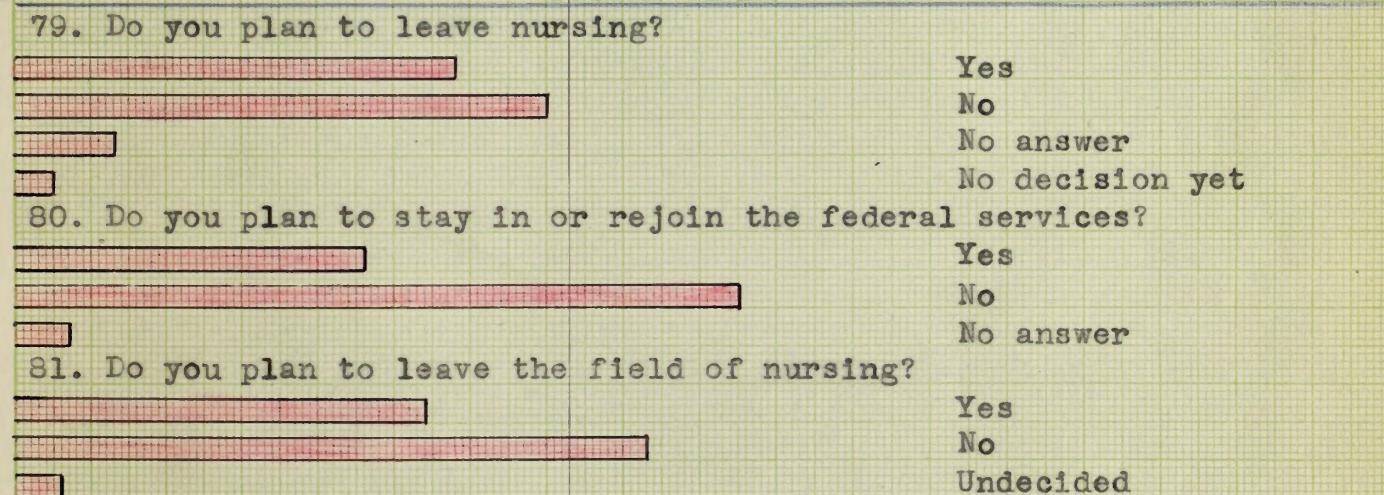
Vertical line indicates mid-point of total returns.





VII.

FUTURE PLANS



Vertical line indicates mid-point of total returns.

CHAPTER III

A SUGGESTED IN-SERVICE PROGRAM FOR FACULTY MEMBERS IN A SCHOOL OF NURSING

Introduction

Traxler says,

Ideally conceived, guidance enables each individual to understand his abilities and interests, to develop them as well as possible, to relate them to life goals and finally to reach a state of complete and mature self-guidance as a desirable citizen of a democratic social order. Guidance is thus vitally related to every aspect of the school--the curriculum, the methods of instruction, the supervision of instruction, disciplinary procedures, attendance, problems of scheduling, the extra curriculum, the health and fitness program and home and community relations.^{1/}

Guidance for student nurses has always been present to some degree but the emphasis on the importance of protecting the patient and carrying on one of the most important services in the hospital left little leeway for constant attention to the development of the individual nurse. Since student nurses constantly deal with human life and the patient is the center of activity, chance for error must be reduced to a negative factor and of necessity the training is rigid and didactic. In many instances the director of the nursing

^{1/}Arthur B. Traxler, Techniques of Guidance, Harper and Brothers, New York, 1945, p. 9.

service of a hospital is also the director of the school of nursing. This dual responsibility often leads to more dependence upon the student nurse to dispense the actual care necessary to operate the hospital and once again service comes before education.

The majority of the junior faculty members (head nurses and clinical instructors) are without advanced preparation and sometimes without sufficient experience. Their education in many instances was of the same pattern of that which they are dispensing. There is often a great need for cultural and mental growth and stimulation toward community participation.

In the suggested in-service program which follows, general instruction in guidance will be offered and followed by meetings of specialized groups who, in turn, will report their findings to the entire group. It is to be understood that "faculty" as used refers to any and all those persons who have any direct contact with the education of the student nurse.

The logical person to develop such a program as is suggested should be someone prepared and sincerely interested in guidance. In some schools it may be an instructor or assistant director; in another the counselor or director of guidance. Regardless of her position or title the person should have qualities of leadership, ability to teach, be mature, understanding, sincere, objective, and have a sound

basic knowledge of administration and teaching in a school of nursing. It is advisable that such a person should have worked in the hospital for a period of time in order for her to be familiar with the policies and problems and co-workers in the institution.

General Objectives of Program

The school of nursing is responsible for the total development of its students. This program is planned with a view toward assisting members of the faculty and the student group to accomplish this objective. The desired ultimate outcome of such a course is better education for the student, better care for the patient, and increased professional growth and development of faculty members.

The general objective of the program is to acquaint those concerned with the education of the student nurse with a working knowledge of guidance to prepare them to participate in planning, carrying out, and realizing the full value of guidance activities in a school of nursing.

Objectives

- To create within the faculty member an understanding of what is meant by guidance in light of the views of many experts in the field.
- To help the faculty member to formulate his own definition of guidance as applicable to a nursing school.
- To direct the faculty member to authoritative sources of help that would assist him in organizing and carrying out a program of guidance.

- To increase the understanding of how to go about developing and practicing guidance in a school of nursing.
- To stimulate a desire and increase the ability of the faculty member to participate in a program of guidance.
- To guide the faculty member to develop her ability to discern individual differences.
- To help develop within the faculty member a deeper appreciation of the individual personality, its reactions, and powers of adjustment.
- To help develop a greater interest and satisfaction within the faculty member for her work as a nurse educator.
- To cultivate within the faculty a dynamic philosophy of nursing education that provides for continuous growth and adjustment.
- To present for the consideration of the faculty the place of nursing in the present social scene and to stimulate them to consider its place in the future.
- To "purpose" the less experienced faculty members.
- To create a feeling of belongingness by participation which receives consideration and recognition.
- To increase the inter- and intradepartmental cooperativeness by sharing plans and common goals.
- To increase the ability of the faculty members to work together.

Overview

The program will be presented and discussed in the following unit divisions. The emphasis will vary according to the preparation and interests of the group.

Unit I: History and Background of Guidance (in Education and Nursing)

Unit II. Characteristics of a Guidance Program and Techniques of Guidance

- To increase the understanding of how to go about developing and practicing guidance in a school of nursing.
- To stimulate a desire and increase the ability of the faculty member to participate in a program of guidance.
- To guide the faculty member to develop her ability to discuss individual differences.
- To help develop within the faculty member a deeper appreciation of the individual personality, its reactions, and powers of adjustment.
- To help develop a greater interest and satisfaction within the faculty member for her work as a nurse educator.
- To motivate within the faculty member a dynamic philosophy of nursing education which provides for continuous growth and adjustment.
- To present for the consideration of the faculty the place of nursing in the present social scene and to stimulate ideas to consider its place in the future.
- To "personify" the less experienced faculty members.
- To create a feeling of responsibility by participation which receives consideration and recognition.
- To increase the inter- and intra-departmental cooperativeness by sharing plans and common goals.
- To increase the ability of the faculty members to work together.

Methods

- The program will be presented and discussed in the following units:
- The organization and interests of the group.
- History and development of guidance in education and nursing.
- Characteristics of a guidance program and types of guidance.

Unit III: Areas of Guidance in Nursing and Common Problems
in These Areas

Unit IV: Application of Guidance to Functional Situation--
in Individual Areas and as a Whole

Techniques for Discovering Needs, Interests, and

Problems of Individual Students

Examination of the administrative chart of the hospital and
school and the relative position of each faculty member.

Study of the functional plan or job-analysis of the position
of each class member in order to know exactly what her
contribution to the operation of the school of nursing
and institution is expected to be. (If a job-analysis
is not available, this can be developed into a group
activity that could precede the actual meetings and
give the director of the program an opportunity to
have personal interviews with each student.)

Examination of the cumulative records of each faculty member
to determine her qualifications, interests, and progress
to date.

Interests expressed by the faculty member.

Personal conference with each faculty member before, during,
and after program.

Pre-test in guidance and personal inventories that are made
during the exploration of guidance.

Approaches

The whole program should emerge as a result of a felt
need and develop according to the needs of the group.

The approaches should be natural, applicable, varied,
and stimulating. The use of problems from actual situation,
presented by the faculty member, will be encouraged. Relation
of familiar material to new will be established to create

Unit III: Areas of Guidance in Nursing and Common Problems
in These Areas

Unit IV: Application of Guidance to Functional Situation--
in Individual Areas and as a Whole

Techniques for Discovering Needs, Interests, and

Attitudes of Individual Students

Examination of the relative importance of the personal and
school and the relative position of each family member.

Study of the functional plan or job-analysis of the position
of each class member in order to know exactly what her
contribution to the operation of the school is during
and limitation is expected to be. (If a job-analysis
is not available, this can be developed first by
activity that could produce the actual results and
give the director of the program an opportunity to
have personal interviews with each student.)

Examination of the cumulative records of each family member
to determine her qualifications, interests, and progress
to date.

Interests expressed by the family member.

Personal conference with each family member before, during,
and after program.

Interest in guidance and personal investigation that are made
during the operation of guidance.

Approaches

The whole program should emerge as a result of a felt

need and develop according to the needs of the group.

The approaches should be natural, explicable, varied,

and stimulating. The use of problems from actual situation,

presented by the family member, will be encouraged. Relation

of familiar material to new will be encouraged to create

continuity.

Techniques of student self-analysis, examination of tests, and taking tests will be employed.

The use of charts and graphs and the development by the faculty member of a present and future program of guidance for the actual situation will be planned. The follow-up of the use of this program in one area after another will be carried out.

Individual conference and supervision will be given. Seminar and group conferences will be sponsored to develop certain aspects of the program. The value of an attractive and informative bulletin board will be emphasized through the use of recruitment demonstrations and vocational materials used for guidance activities.

In some instances field trips may be advisable. If this is done the leader will have first taken the trip and the desired outcomes for the trip previewed. (Individual field trips might be advisable if certain faculty members have never had public health or a group trip may be taken to a local college to observe the operation of an excellent guidance program.)

Experts in the field of guidance, counseling and placement, and nursing specialty may be brought in for certain areas--if these people are available and their services can be procured.

Evaluation Techniques

Pretest: To determine the background knowledge of the students.

To determine students' ability in spontaneous written expression.

Reading Assignments (Oral Report):

To determine ability to read for complete meaning.

To determine ability to express self before class.

Observation in Class:

To determine amount of interest.

To determine ability to follow line of thought.

To determine ability to contribute to group thought.

Presentation of Student Situations from Present School and

Past Experience:

To determine ability to recognize problems.

To determine ability to apply principles of guidance as developed in class.

To determine ability to express self before group.

Group Activity:

To determine ability to prepare a group report.

To determine ability to work with others.

Term Paper or Case Study:

To determine ability to apply learning to actual functional situations.

Resources

Students' own experience

Clinical units of hospital

School records and reports

Library at hospital, in nursing school, and public library

Sample forms and tests

Community resources--

Local college or hospital with guidance programs

Counseling and placement services

Testing bureau

Plan for Instructor

Problem and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
Pretest:	Informal pretest	Introductory class to determine needs and preparation of group; to discuss proposed in-service program--values, objectives, and means of achieving outcomes.	Stimulation of student interest and desire to know more about guidance.
In your own words define "Nursing."	Examination of tentative course outline (follows unit plans)		Creation of "belongingness" by participation in problem solving for school.
Do you think proficiency records should be discussed with students and signed by both rater and student concerned? Why or why not?	Expression of opinion and suggestions for addition or deletion of proposed activities.	Pretest:	Realization that this program is based on guidance principles.
What do you understand by the term "anecdotal record"?	Individual assignment of reading.	To determine background of students.	Increased ability of student to express opinions in written form.
Should a student be allowed sick time allowance during her period of professional preparation? How much? Why or why not?		To act as introduction to proposed study.	Increased ability to read for meaning.
Mary R. had poor grades in two classes and just failed a midterm examination. She is a junior student and eager to do well. How do you think she could be helped or do you think she should be dropped from the school?		To provide connecting link between past, present, and future experience.	
Martha G. can never seem to finish the ward assignment given to her. How would you go about helping her?			
Are you familiar with program of studies and plan of experience in this school?			

Plan for Instruction

Problem and Questions accompanying experiences -

Protest: the student's protest -

In your own words defining the meaning of the word "protest"
 "protest."
 Do you think protesting is necessary?
 records should be his - the student's opinion and
 classed with students and suggestions for action
 should be both taken and the student's opinion of proposed
 student's opinion of the protest
 or why not?

Individual assignment of read-
 what do you understand by the word "protest"?
 the word "protest" means to -
 record?

Should a student be allowed to protest during
 his period of professional
 preparation? How much?
 why or why not?

Why do you think students in
 the class are just
 protesting? Is it a junior
 protest? How do you think
 she could be helped or be
 helped? Should she be
 dropped from the school?

Why do you think students in
 the class are just
 protesting? How would
 you go about helping her?

Are you familiar with pro-
 test of students and plan
 of assistance in this
 school?

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
How may these principles of guidance be applied to the nursing school?	<p>Listening to philosophy of poem (Things wisely and richly said are long remembered--Ruskin.)</p> <p>Definition found by each student is given aloud.</p> <p>Member of group tallies definition areas on black-board.</p> <p>Suggestions for additions for special applications to nursing.</p> <p>Group decision on definition.</p> <p>Division into groups according to interest and position in school.</p> <p>Chairman selected for this assignment only.</p> <p>Division of problems of types of guidance.</p>	<p>Guidance--its meaning and purpose. Definition created by pooled readings.</p> <p>Read poem regarding points of view--"Six blind men who went to see the elephant."</p> <p>Principles underlying guidance.</p> <ol style="list-style-type: none"> 1. Help student to help self by creating awareness of problems and helping her to actively solve them. 2. Help students to be effective in all phases of living, professional and non-professional. 3. Help student to make plans for present and future. 4. Provide for inclusion of all students in guidance program. 5. Aid students to make adjustments. 6. Guidance is continuous--need greater as problem becomes complex. 	<p>Establishment of a definition that is valid, understood, and acceptable to group.</p> <p>Increase students' acquaintance with opinions of experts in field.</p> <p>Development of ability to read for meaning.</p> <p>Appreciation of necessity of knowing all sides of story--even in defining.</p> <p>Development of ability to speak and express self to group.</p>
<p>How many types of employment within nursing are open to professional registered nurses?</p> <p>Do "dropped" students ever become practical nurses? Does this present an added problem to nursing?</p>	<p>Group activity--</p> <p>After group meeting--report to class findings of how the selected type of guidance is carried on in this school of nursing at present time.</p>	<p>Types of guidance--</p> <p>Vocational:</p> <ol style="list-style-type: none"> 1. Survey of opportunity (foretaste group guidance). 2. Change of vocation. 3. Placement and follow-up. 4. Concern and regard for drop-out. 5. Specialization. 	<p>Increased ability to apply learnings to functional situations.</p> <p>Increased understanding that adjustment is never static.</p> <p>Development of cooperative spirit of enterprise and ability to work with others to set common goals and solve common problems.</p>

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
How close are your professional and non-professional ties to the school from which you graduated?	Plan of report by group Types of guidance Years Educa- Voca- Per- So- tional tional tional tional	Educational: 1. Orientation (school--community--wards--profession) 2. Educational advisement: Selection of students for ability and school purpose to fit student needs and vice versa. Selection of courses--preparation for experience solving educational problems. 3. Correction of poor study habits.	Clarified understanding of "other fellows" problem in the school program. Development of ability to recognize problems. Increased insight into the value of these guidance functions--e.g., need for community participation for understanding of patient and his economic and social problem.
Should students have enforced study periods? Did you have them during training?	Pre-clinical Junior Intermediate Senior Co-curricular	Personal: 1. Counseling with regard to personal problems. 2. Detection of problems early in stage of development. 3. Prevention of personal problems. Family Financial Health Social-personal habits Emotional Mental hygiene	
If E.M. is determined, capable of caring for seriously ill patients and assuming responsibilities of assignment--would you say she should at that point also be capable of deciding for herself how late she should stay out at night?	How carried out Statement of known problems in these areas.	Social: 1. Extra or co-curricular activities. Social activities Development of cultural taste Student government Physical activities Community participation	
How many students that you know of have active church affiliations?			
How many students that you know belong to non-professional groups or clubs?			
What is the broad meaning of "Orientation"?			
How many nurses have kept house? Operated a family budget?			
Do you know present price of milk and cream?			

Problems and Questions

Learning Experiences

How close are your pro-
fessional and non-pro-
fessional ties to the
school from which you
graduated?

Should students have an
forced study periods?
Did you have them dur-
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If I.M. is determined
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How many students that
you know of have active
professional affiliations?

How many students that
you know of belong to non-
professional groups or
clubs?

What is the broad meaning
of "professionalism"?

How many nurses have kept
houses? Operated a family
business?

Do you know present price
of milk and cream?

How carried out
Statement of known problems in
these areas.

How carried out
Statement of known problems in
these areas.

Problems and Questions	Learning Experiences	Subject Matter Selection and Organization	Desired Outcomes
	Report of group chairman.		Relation of past and present to future plans.
	Construction of chart on blackboard to show areas of guidance as practiced at present in school.		Application of learnings to practice.
	Suggestions for additions or subtractions.		Increased insight into present needs in school guidance program.
	Copy program--keep for future reference.		Interest to know how to go about fulfilling these needs.
			Increased information through pooling of information, experiences, and readings.
How has regard for human welfare and common good affected nursing?	Listening to sources.	Sources that have influenced the development of the guidance movement.	Insight into relative position of nursing in a rapidly changing social order.
Name some nurses that were active in slum clearance and care to indigent.	Applying this learning to influences that have affected nursing.	Humanitarianism: Regard for human welfare and common good.	Appreciation of increased complexity of life situations.
Name special funds for improvement of nursing care.		Religion: Help build strong character in youth. Help oldsters out of difficulty. Renew faith in God.	Application of learnings to present situation.
What national organization is dedicated to this purpose?		Mental hygiene: Growth and development of psychological and psychiatric point of view. Attention to delinquency--cause and cure.	
What community organizations are set up for purpose of human welfare and common good?		Complexity of life: Population increase City life--social change Industrial revolution	
How has religion affected nursing?			
How has the understanding of mental illness changed nursing?			
In which areas have we kept abreast of modern education?			

Problems and Questions
Suggested for Discussion

1. How has the nursing profession changed in the last few decades?
2. What are the major problems facing the nursing profession today?
3. How has the role of the nurse changed in the last few decades?
4. What are the major ethical issues facing the nursing profession today?
5. How has the nursing profession contributed to the health care system in the last few decades?
6. What are the major challenges facing the nursing profession in the future?
7. How can the nursing profession better serve the needs of the community?
8. What are the major barriers to the advancement of the nursing profession?
9. How can the nursing profession better address the needs of the underserved population?
10. What are the major issues facing the nursing profession in the 21st century?

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
		<p>Trends in modern education:</p> <p>Emphasis on social education.</p> <p>Habits of critical inquiry.</p> <p>Consideration of individual differences through</p> <ul style="list-style-type: none"> Test Measurements Counseling Electives Co-curricular activities. <p>Teaching by principles--units.</p> <p>Functional experience in consideration of vocational choice.</p> <p>Building permanent interests.</p>	
How many nursing organizations are represented by members of the class?	Elicit historical development from student group.	Development of guidance viewpoint in nursing--	Appreciation, through knowledge, of tremendous problems the profession has faced, carried, and is attempting to solve.
What have "organizations" accomplished for the group as a whole?	Examination of chart of development of nursing.	1873-1893 Pioneer years	Recognition and knowledge of new advances and nursing leaders.
What are some of the individual organization's contributions?	Assignment of written report tracing one area of development in nursing--	1893-1913 "Boom" of nursing schools	Acquaintance through reading of experts and those interested in field.
What services are available to you?	Tests and measurements	1913-1933 Standard setting and stocktaking period	Increase of respect for profession and their own professional future.
Can you cite some future plans of nursing?	Extracurricular activities	1933-1947 Progress and recognition	Increased ability to write according to planned outline and to express self clearly.
Does the philosophy of nurse education represent your thinking?	Counseling and placement service	Philosophy of nursing education--	
	Nursing information bureau	1. Education for useful living.	
	Publications department	2. Preparation for effective living--professional and non-professional.	
	Nursing organizations	3. Provision for growth through activity.	
	Highlights of curriculum		
	Vocational guidance for nurses		

Problems and Questions

Learning Experiences
The nursing profession is a dynamic one, constantly evolving and adapting to the needs of the community. This evolution is driven by a variety of factors, including technological advances, changes in the health care system, and the growing emphasis on patient-centered care. As the profession evolves, it presents a series of challenges and opportunities for its members. These challenges include the need for continuous education and professional development, the importance of maintaining high standards of practice, and the need to address the diverse needs of a multicultural population. Opportunities, on the other hand, arise from the potential for innovation in practice, the chance to make a significant impact on the health of the community, and the ability to work in a variety of settings, from hospitals to home care. The nursing profession is thus a field of constant growth and change, one that requires its members to be lifelong learners and adaptable professionals.

What are some of the challenges facing the nursing profession today?
The nursing profession faces several significant challenges in the current healthcare environment. One major challenge is the shortage of nursing personnel, which is exacerbated by an aging workforce and a lack of new entrants into the profession. This shortage leads to increased workloads, which can compromise the quality of patient care. Another challenge is the rapid pace of technological change, which requires nurses to continually update their skills and knowledge. Additionally, the nursing profession is often underappreciated and underpaid, which can lead to job dissatisfaction and high turnover rates. Finally, the increasing complexity of patient care, particularly in the areas of chronic disease management and end-of-life care, presents a significant challenge for nurses, who must often work with limited resources and time constraints.

How can the nursing profession better address the needs of a multicultural population?
To better address the needs of a multicultural population, the nursing profession must adopt a culturally competent approach to care. This involves recognizing and respecting the cultural differences of patients and families, and tailoring care plans to meet their specific needs. One way to achieve this is through ongoing education and training for nurses on cultural differences and communication styles. Another way is to hire a diverse workforce that reflects the community it serves. Additionally, nurses should be encouraged to engage in cultural assessment with their patients, asking about their beliefs, values, and preferences for care. By taking these steps, the nursing profession can provide more effective and respectful care to all patients, regardless of their cultural background.

What role should nurses play in the prevention of disease and the promotion of health?
Nurses play a crucial role in the prevention of disease and the promotion of health. They are often the first point of contact for many patients, and they are well-positioned to identify risk factors for disease and provide education and counseling to help patients make healthy choices. For example, nurses can teach patients about the importance of a healthy diet, regular exercise, and not smoking. They can also provide immunizations and screenings for various diseases. In addition, nurses can play a key role in the management of chronic diseases, helping patients understand their condition and adhere to their treatment plans. By focusing on prevention and health promotion, nurses can help reduce the burden of disease on the healthcare system and improve the overall health and well-being of the community.

How can the nursing profession better address the needs of the elderly population?
The nursing profession is well-suited to address the needs of the elderly population, as many nurses have experience working with older adults. To better address their needs, nurses should focus on providing comprehensive geriatric assessment and care. This includes assessing the patient's physical, cognitive, and functional status, as well as their social support system. Nurses should also be trained in the management of common geriatric conditions, such as dementia, depression, and falls. Additionally, nurses should be encouraged to provide palliative care and end-of-life care to elderly patients, helping them and their families make informed decisions about their care. By providing high-quality, patient-centered care to the elderly population, the nursing profession can help improve their quality of life and ensure a dignified end-of-life experience.

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
		4. Education of "whole" person.	
		5. Provision of equal opportunity for each to participate to extent of ability.	
		6. Education is continuous--professional people continue to be students for life.	
What problems do you remember that you had during training?	Statement and discussion of problems.	Characteristics of a guidance program:	Identification of self to problems and program of guidance.
How did the school help you to solve these problems?	Relating familiar and past experience to future need.	1. Provides for study of individual through interviewing, observation and testing. Attention paid to intellectual capacity, past achievement, interests, aptitudes, social adjustment, home environment.	Increased ability to recognize problems.
How can such a program be purposefully integrated into a nursing school program?		2. Provides for cumulative records so that needs, problems, and progress of the student are shown.	Development of ability to participate in total programs.
How would a pre-planned guidance program function in the following problems:		3. Provides for maintenance of adequate health facilities and program.	Increased recognition and insight into individual differences.
R.J. reports off duty because of painful feet. Examination of shoes show ill fit. Examination of feet show corns, calluses and infection between toes.		4. Provides for adequate orientation at different levels of progress.	Insight into scope of guidance program.
Evelyn J. is assigned to duty in the nursery. Instead of taking the temperature of each baby, she is observed writing in an approximate figure.		5. Provides individual and group guidance for educational and vocational activity.	
Marjorie F. has been in school 3 months and plans to leave		6. Provides opportunity for help with personal problems.	
		7. Provides social atmosphere and activities that tend to prevent problems.	
		8. Provide living conditions conducive to self-direction.	

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
nursing because she says she is "disillusioned."		9. Provide for placement and follow-up of drop-outs and graduates.	
Emma G. wishes to go on and be a teacher.		10. Provides for opportunity for development of philoso- phy that produces effective living.	
	Suggested techniques--	Techniques of guidance:	Increase understanding of how guidance functions.
	Oral activity.	Interview.	
	Indication of technique used to solve stated and student suggested problems.	Observation and appraisal of qualities.	Insight into importance of personal knowledge of individual stu- dent.
		Records--rating scales--anec- dotal records, behavior de- scriptions, test results, health fitness records--cumu- lative records.	
		Family contacts.	
		Orientation instruments-- Letters--handbooks--programs of studies--paper.	
		Follow-up--planned before leaving.	
		Use of the placement service.	
		Tests and measurements.	
		Know each student personally.	
		Teachers must know their subject thoroughly from many aspects.	
		Development of effective work habits in student.	
		Encouragement given not freely but based on "where deserved."	
		Develop belongingness by sharing responsibility and honors.	

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
State reasons for "interview."	Listening activity.	Interview:	Increased understanding of the "interview" as a tool of guidance.
Describe ways of opening an interview.	Oral activity: Answering questions and making suggestions for	Principles--the interviewer:	Increase awareness of interview situations.
How can the interviewee be put at ease?	a. Value of interview. b. Types of interview. c. Problem areas.	1. Must be familiar with certain basic facts about human beings (family, home, religion, education, etc.).	Increased ability to think and speak in orderly fashion.
What preparation should you make for an interview?		2. Must realize that all behavior is motivated.	Development of non-personal approach to problem.
In your present situation how many kinds of interviews do you handle?		3. Should recognize objective and subjective facts.	Realization of importance of maintaining professional level of relationships.
What are most common problem areas in nursing schools?		4. Must know importance of not judging attitudes casually--keep suspended judgments.	Increased acquaintance of current thoughts and authors in field of interviewing and counseling.
		5. Avoid too hasty generalizations.	Increased awareness of problem areas and problems of student nurses.
		6. Must not let feelings sway judgment.	
		7. Must be able to modify technique as circumstance demands.	
		8. Should realize the need of wisdom in going beneath the surface.	
		9. Must apply proper type of technique.	
		Value of interview:	
		1. Clarifies problem.	
		2. Suggests solutions.	
		3. Chance to analyze points of view regarding life.	
		4. Stimulates and increases self-confidence.	
		5. Opportunity to open up new avenues of interest.	

Problems and Questions

These questions for "Interview"

Describe ways of obtaining an interview
Interviewer
Interviewee

How does the interview process work?
at work?

What preparation should you make
for an interview?

In your present situation how many
kinds of interviews do you have?

What are the most common preparation
for an interview?

What are the most common preparation
for an interview?

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for an interview?

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for an interview?

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
<p>Do you agree with Thomas' outline of basic human desires and needs?</p> <ol style="list-style-type: none"> 1. Security 2. Recognition 3. New experience 4. Response 	<p>Could you add any others?</p>	<p>Types of Interview: Therapeutic--assistance Diagnostic--evaluation Research--information</p> <p>Theories of interview: Jung--theory of transformation Thoreau--theory of quest for values Pollette--creative experience</p> <p>Procedure of interview: Elliott--combined effort Williamson--prescription Rogers--non-directive</p> <p>Classification of problem: Vocational, educational, social and personal adjustment problems, financial problems, family problems, health problems.</p> <p>Set up solution in each area.</p> <p>Attitudes of the counselor--</p> <ol style="list-style-type: none"> 1. Respect for the integrity of the person. 2. Respect for personal autonomy--respect client's decisions. 3. Respect responsibilities of each party. 4. Belief in the counselee's ability and reliability to adjust. 5. Respect for the whole personality of client. Be concerned toward positive and negative strivings. 6. Counselee must lead the way to an understanding. No person can solve the problems of another person. 	<p>Increase regard for individual differences.</p> <p>"Whole" person approach to problems.</p>

How can these be used as a basis for guidance of individuals?

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
		<p>7. Must have a desire to have the counselee understand and direct himself.</p> <p>8. Ability to define behavior--some clients will shift responsibility.</p> <p>9. Permissiveness of situations must be stressed.</p> <p>10. Relationship should always remain professionally friendly.</p> <p>11. Help counselee get started.</p> <p>Strang's outline--Counseling Techniques in College and Secondary Schools--</p> <p>Preparation for the interview Beginning of the interview Development of the interview</p>	
	<p>Examination of Strang printed outline.</p> <p>Written assignment--</p> <p>Examine past experience and knowledge and state at least one problem in each of problem areas common to school of nursing.</p>		
What purposes may a pretest serve?	Listening activity.	Observation and Appraisal of Qualities.	
Have you ever filled out a self-rating or self-analysis form for yourself? Of what value would such a technique be?	Examination of records.	Methods--Pretest	Appreciation of need for scientific attitude toward subjective problems.
When is self-rating more desirable--when student is succeeding, failing, or as a check or guide for student growth on each service or at stated intervals?	Fill out self-appraisal form--	Self-appraisal on selected scale	
	Self-Analysis Chart taken from O'Hara's-- <u>Psychology and the Nurse</u>	Check lists and experience records	
	Application to self for results.	Anecdotal records	Appreciation of importance of knowing individual's personality.
		Rating--scales	
		Objective observation of performance	
		Observation of conference	
		Written expression	
		Plans of nursing care	
		Nursing care study	
		Tests	
	<u>1/Frank O'Hara, Psychology and the Nurse, Saunders Co. N. Y., 1939, pp. 208-213.</u>		

Problems and Questions

1. What is the purpose of the examination?

2. What is the scope of the examination?

3. What is the format of the examination?

4. What is the duration of the examination?

5. What is the marking scheme of the examination?

6. What is the syllabus of the examination?

7. What is the importance of the examination?

8. What is the role of the examination?

9. What is the significance of the examination?

10. What is the impact of the examination?

11. What is the value of the examination?

12. What is the benefit of the examination?

13. What is the advantage of the examination?

14. What is the strength of the examination?

15. What is the power of the examination?

16. What is the authority of the examination?

17. What is the jurisdiction of the examination?

18. What is the competence of the examination?

19. What is the capacity of the examination?

20. What is the capability of the examination?

21. What is the capacity of the examination?

22. What is the capacity of the examination?

23. What is the capacity of the examination?

24. What is the capacity of the examination?

25. What is the capacity of the examination?

26. What is the capacity of the examination?

27. What is the capacity of the examination?

28. What is the capacity of the examination?

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
<p>What are the disadvantages of the anecdotal behavior record?</p> <p>How often should a student have conferences for stocktaking?</p>	<p>Practice writing anecdotal records on one student for one week--summarize.</p> <p>Examination of rating scales--from various sources for form, content and ease of rating.</p>	<p>Anecdotal record-- Series of observed behavior recorded accurately in terms of what was observed.</p> <p>1/ For writing anecdotal records:</p> <ol style="list-style-type: none"> 1. Know what personality traits to look for. Know what traits student is expected to develop. Know types of behavior in which traits are manifested. 2. Record only accurate, actual observation. 3. Keep frequent systematic record--one entry or single incident not a trend. 4. Provide for student participation and growth by self-evaluation and discussion of anecdotal records. 5. Interpret and evaluate records at intervals. Final summary is logical deduction. 6. Plan for development of desirable personality traits through personal, professional, and educational guidance. <p>Rating scales:</p> <p>Form</p> <p>Purpose</p> <p>Analyze or evaluate abilities and qualities of individual student. Guide to development and improvement within student.</p> <p>Method of report.</p> <p>Part of cumulative record.</p>	<p>Insight into habit formation.</p> <p>Increased awareness of personality traits.</p> <p>Increased awareness of individual differences.</p> <p>Increased ability to apply learnings to functional areas.</p> <p>Increased ability to organize material and write clearly.</p> <p>Increased understanding of self.</p>

1/A. M. McClelland and R. L. McManus, "Appraising Personality," American Journal of Nursing (May, 1941), 41: 584.

Problems and questions - Learning Experiences

Let me see the disadvantages of
the anecdotal behavior record
How often should a student have
conferences for counseling?

What are the advantages of
the anecdotal behavior record?
How often should a student have
conferences for counseling?

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the anecdotal behavior record?
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conferences for counseling?

What are the advantages of
the anecdotal behavior record?
How often should a student have
conferences for counseling?

What are the advantages of
the anecdotal behavior record?
How often should a student have
conferences for counseling?

Examination of setting
anecdotal-behavior record
sources for data and
text and case of setting.

What are the advantages of
the anecdotal behavior record?
How often should a student have
conferences for counseling?

What are the advantages of
the anecdotal behavior record?
How often should a student have
conferences for counseling?

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
<p>Can you define "personality"?</p> <p>What do you think "intelligence" means?</p> <p>How many kinds of intelligence are there?</p>	<p>Examination of test.</p>	<p>Record:</p> <ul style="list-style-type: none"> Constructed cooperatively. Should meet need of what is to be judged and where. Should be as objective as possible. Clear and definite to rater and rated. Relatively short and simple. Free of bias. <p>Rate after observation--don't rate if you don't know person--base rating on fact.</p> <p>Don't rate under pressure.</p> <p>Discuss rating with individual rated.</p> <p>Tests and Measurements:</p> <p>Tests are one of our tools to use--not misuse.</p> <p>John Ruskin says a smart man is one who asks--</p> <ul style="list-style-type: none"> Why am I here? What is around me? How can I make the best of it? <p>Deschenitz says--Intelligence is the ability with which we can make adjustments.</p> <p>Vocabulary in testing.</p> <p>Tests available to determine aptitudes--</p> <ol style="list-style-type: none"> 1. Moss-Hunt Aptitude Test for Nursing <ul style="list-style-type: none"> Publisher--Psychological Service, Washington, D.C. 	<p>Awareness of test and measurement movement.</p> <p>Acquaintance with authors and research articles regarding testing.</p> <p>Increased insight into test construction and their evaluation.</p>

Problems and Questions in the Learning Laboratory

1. The first problem is to determine the nature of the learning process.

2. The second problem is to determine the factors which influence the learning process.

3. The third problem is to determine the methods which can be used to study the learning process.

4. The fourth problem is to determine the results of the learning process.

5. The fifth problem is to determine the applications of the learning process.

6. The sixth problem is to determine the limitations of the learning process.

7. The seventh problem is to determine the future of the learning process.

8. The eighth problem is to determine the importance of the learning process.

9. The ninth problem is to determine the role of the learning process in the development of the individual.

10. The tenth problem is to determine the relationship between the learning process and the environment.

11. The eleventh problem is to determine the methods which can be used to improve the learning process.

12. The twelfth problem is to determine the factors which influence the effectiveness of the learning process.

13. The thirteenth problem is to determine the results of the learning process in the development of the individual.

14. The fourteenth problem is to determine the applications of the learning process in the development of the individual.

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
Are interests static?	Take Kuder and <u>Study of Values</u> as out of class.	Moss-Hunt Aptitude Test for Nursing (cont.) Author--F.A.Moss--Thelma Hunt Publication--Form I 1930, Form II 1940 Cost--about 10¢ per copy Testing time--2 hours Number of forms--I and II Description--5 parts: memory, general information, judgment, scientific vocabulary, ability to understand direction Construction Validity--.65, equal to ACE Reliability--no indication Scoring--hand scored Norms--percentile ratings for high school graduates applying for entrance to nursing	Acquaintance with tests that may be used in nursing.
Have your interests changed since you entered training?	Both may be hand scored.	2. Interests-- Strong and Kuder Study of Values--Allport } (follow outline)	Greater understanding of self.
What do you think your interests are?	Application to self. Examination of tests.	3. Scholastic Aptitude-- ACE Psychological Ohio State	
		4. Adjustment Inventory-- Bells	
	Take test out of class-- applying learnings to self.	5. Personality-- Bernreuter California	
What would your reaction be if you were told a test of your nursing knowledge would be given?	Examination of tests.	National League of Nursing Education Cooperative Test Service--	Acquaintance with progress made in testing areas by nursing organizations.
Logically speaking, in which area of nursing should you rank highest?	Listening activity. Expression of opinion.	Tests available-- Pre-Nursing Specific Achievement State Board Pool Basic Comprehensive Notes on how to administer tests.	Appreciation of objective measurement for evaluation of progress in nursing education.

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
Is it true that the longer a nurse is out of training the better nurse she becomes?			Development of philosophy of constant growth.
Should experienced nurses be paid more than inexperienced nurses?			Understanding that tests are far from infallible and serve only as guides and as part of a total picture, e.g., like one symptom is small part of diagnosis--more objective symptom, more clear diagnosis--collection of objective symptoms leads to logical diagnosis.
Should all nurses doing staff duty receive the same pay?			
Does a school of nursing in Texas teach the same material as a school of nursing in New York?			
Do collegiate schools turn out better nurses than 3-year basic schools of nursing--by the records?			
Could a "National Board Examination" be a method of grading a school's output?			
The Cadet Program had a very successful campaign of recruitment. What were influencing factors?	Group activity and report--	Areas to be explored:	Increased ability to work in groups.
Can and should the nursing profession direct students to the most desirable schools?	Present Principles Problems Plan Problems for discussion	1. Recruitment of students for nursing.	Increased ability to plan report.
Should certain students go to small schools and others to larger schools? How can you help student make choice?	Presentation of plan to group.	2. Selection of students.	Increased ability to apply learnings to functional situation.
What are qualities desirable in a nurse candidate?	Discussion and questions	3. Plan for orientation of new student to school and residence.	Increased ability to express self in group and before class.
Can these be predetermined?	Application of findings to present situation.	4. Report of plan of pre-clinical period.	Increase ability to evaluate methods of guidance.
Recall and outline the program of orientation present when you entered training? Evaluate it in terms of present knowledge and your reaction.	Listening activity--learning interrelations of one department with other.	5. Orientation and educational advisement to ward, services, and affiliation.	Increase ability to apply techniques of guidance in present situation.
		6. Study of rating scales and records.	

Problems and Questions in Nursing Education

Is it true that the longer a nurse has been out of training the better nurse she becomes?

Should experienced nurses be paid more than inexperienced ones? Should all nurses doing night duty receive the same pay? Does a school of nursing in Texas teach the same material as a school of nursing in New York? Is collegiate schools any better than for nurses than 3-year basis schools of nursing--by the way?

Could National Board Examinations be a method of grading nursing's output?

The United States had a very successful campaign of retraining during active and that were influencing factors in the report--

Can and should the nursing profession be organized to assist students in the study of principles, theories, and practice? Should certain students be selected for study in certain schools and others not? How can you help students make choices? How can you help them in their studies?

What are qualified teachers in nursing? Can these be produced? How can we get the best out of them? How can we get the best out of them?

Recall and outline the program of education provided when you were in nursing school? In fact of present knowledge, how much of one's education is not with others?

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
Are you familiar with how your job and department fits into the educational plan?		7. Report of master rotation plan and explanation of principles that underly this plan.	
Have you ever examined a student's records?		8. Program of health and welfare.	
		9. The extra- or co-curricular program.	
		10. Vocational guidance.	
		11. Report of records and plan of follow-up.	
Is a guidance program comparable to an intra-organizational application of "public relations" principles?	Group activity by oral participation-- questions) for plan suggestions) of discussion) guidance	Using master plan of rotation of students as a guide--trace guidance through three years of nursing education.	Increased ability to understand and use techniques of guidance.
How do their desired outcomes differ?	Listening activities. Hearing opinions of other departments.	Draw plan and examine three years in periods. Selection and pre-admission Pre-clinical Junior Intermediate Senior	Application of learnings in guidance to practical and actual situation.
List the purposes of a guidance program.	Visual activity. Creation of a plan of guidance.	Take into consideration-- Purpose and philosophy of school.	Production, in outline form, of a continuous program of guidance which could be used as a basis for the establishment of effective guidance in W _____ School of Nursing.
List the desired outcomes of a guidance program.	Writing activities. Copying plan. Suggestions for future growth and improvement. Evaluation of plan by use of check list "profile rating scale" such as provided by Miss Salisbury.	Selection and admission techniques. Orientation services for new student.	Creation of faculty interest and feeling of responsibility for production and participation in a guidance program.
Differentiate between "guided" and "directed."	Examination of other school activities.	Health service.	Evaluation of proposed program in light of desired outcomes and available criteria.
What is the usual outcome of superimposed teaching?	Examination and creation of interrelation of departmental activities.	Importance of knowing student individually. Counseling.	

Problems and Questions	Learning Experiences	Subject Matter-- Selection and Organization	Desired Outcomes
How can we gain student cooperation in this program?	Suggestions for organizational plan.	Morale building (motivation, discipline, belongingness).	Desire for continued education growth within the faculty group.
How aware need a student be of this "guidance" activity?	Examination of present school organizational plan.	Educational advisement. Orientation to new services and preparation for affiliations.	Appreciation for the need of organized guidance activities.
Can we build personal policies to carry out the proposed program?	Discussion of need for director of guidance as a coordinator and safety device to guard program.	Housing program. } Student welfare. Food service. }	Understanding of the work of the guidance director.
How can such a program be introduced into the school?		Social program.	Cooperation and active use of guidance facilities brought about by this understanding.
Should there be continuous practice of guidance and follow-up reports at future faculty conferences?		Religious program.	Knowledge that effective guidance is present only when there is a combined effort in operation.
Does a guidance program need a director?		Curriculum.	Demonstration of the strength that can be had by unity of purpose.
What are her responsibilities?		Records (availability and validity).	Understandings--
Who conducts the guidance program?		Parent and community relations.	Organization of guidance program.
To whom should the guidance director be responsible?		Interpretation of institutional objectives.	
		Placement and follow-up.	
		Consider use of group guidance--	
		Films.	
		Character building.	
		Organization of guidance.	
		Functions of guidance director.	

W _____ SCHOOL OF NURSING

Sample report of group activity for Unit III. Each group will complete plan far enough in advance of presentation date to enable clerical department time to make mimeograph copies for the class.

REPORT OF ORIENTATION AND EDUCATIONAL ADVISEMENT

Effective Orientation

Interprets the aims and objectives of the organization to the individual and shows the relationship of the many parts to the whole.

Is a continuous process that is carefully planned--not an event.

Provides conditions that are conducive to better function of the individual and produces more and better quality service.

Promotes continuous growth and personality development of the individual.

Enables the nurse to gain insight and to transfer previous knowledge to cope with new situations.

Helps the nurse to create further life purposes that will enable her to contribute as much as possible to the profession and community and to her own personal satisfaction.

Educational Advisement provides for:

- Awareness of the problem
- Establishing a counseling relationship
- Understanding of the problem
- Cooperative advising
- Carrying out plans of action
- Follow-up

Educational advisement is a positive effort to assist the intellectual and personal growth of the individual.

Situation and Problem:

Hopewell is an industrial city with about one hundred and fifty thousand population. The people are mostly of the

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18

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middle class and there are no pronounced nationality groups. There is one institution of higher learning and one hospital.

Hopewell General Hospital is operated on a non-profit basis. Its daily average number of patients is four hundred. The school of nursing is not affiliated with a college. It provides for all services except psychiatry and public health. For these, the students affiliate for a three-month period. There are approximately one hundred and fifty students in the nursing school.

Mary Jones is 21 years old. She is a senior student. She is in good health and her scholastic ability is average. Mary is preparing to begin her three-month public health experience at an agency in another city.

What education counseling should she have before she begins her public health experience? After her arrival at the public health agency, how would you help her organize her past experience and meet her present need and future development?

Bibliography:

Lloyd-Jones and Smith, Student Personnel Program in Higher Education, Chapter 5.

Spaulding, Eugenia K., "Orientation of Nursing Students," American Journal of Nursing (December, 1945), 45:1047-1050.

Torrop, Hilda M., "Guidance Programs in Schools of Nursing," American Journal of Nursing (February, 1939), 39:176-186.

Triggs, Frances O., Personnel Work in Schools of Nursing, pp. 62-63.

The sample problem may have been one in regard to the preparation of a student for a new service or department and her orientation to that department. If the outside affiliation is considered (depending upon the need and interest of the group) the person responsible for the introduction of the students in the new area may be brought in to discuss their program.

Orientation of the student to the school of nursing. (The plan of studies, handbook, and activities should be kept for another report.)

This sample report was created as a small group activity in a course in personnel problems. The writer and three class members developed and reported on this type of problem to a large group. Problems which grew out of the report covered other areas of educational advisement and orientation. Questions with regard to electives and prolonged experience were raised along with questions regarding the advisability of pretests given before each new service.

Main Objective: To acquire a working knowledge of guidance and an interest and desire to cooperate and participate in formulating and carrying on a definite and effective program of guidance in the _____ School of Nursing.

Plan for Accomplishing Objective:

Methods used to reach the objective will include the use of a pretest, written reports, study of problems, self-evaluation and sample testing, individual conferences, group conferences, written examination, and suggested and required readings.

Summary Outline of the Course:

Unit I: Orientation to the course; definition of guidance--what it means and how it functions; history and background of guidance.

Unit II: Study of characteristics of a guidance program; outline of techniques used in a functioning program; examination of techniques and application of them to nursing situations.

Unit III: Problems and how they are met in (1) securing health-care applicants for nursing (recruiting, publicity, selection of students, counseling applicants, financial aid); (2) orientation and educational advisement (correspondence, progress of studies, student handbook); (3) clinical situations (orientation, provision for ward teaching, availability of reference material, student participation); (4) record keeping (cumulative record, records for guidance, use of records); (5) health and welfare program; (6) extracurricular or co-curricular program (social development, personal development, opportunity participation, student-family governance); (7) placement and follow-up (vocational study and adjustment, progress of students as evaluation of school program).

Summary and outline for distribution to class members.

Student Material

W _____ School of Nursing
North Adams, Maine

Faculty Study for Development of Guidance Program in
W _____ School of Nursing^{1/}

Main Objective: To acquire a working knowledge of guidance and an interest and desire to cooperate and participate in formulating and carrying on a definite and effective program of guidance in the W _____ School of Nursing.

Plan for Accomplishing Objective:

Methods used to reach the objective will include the use of a pretest, written reports, study of problems, self-evaluation and sample testing, individual conference, group conferences, written examination, and suggested and required readings.

Tentative Outline of the Course:

Unit I: Orientation to the course; definition of guidance--what it means and how it functions; history and background of guidance.

Unit II: Study of characteristics of a guidance program; outline of techniques used in a functioning program; examination of techniques and application of them to nursing situations.

Unit III: Problems and how they are met in (1) securing desirable applicants for nursing (recruiting, publicity, selection of students, counseling applicants, financial aid); (2) orientation and educational advisement (correspondence, programs of studies, student handbook); (3) clinical situations (orientation, provision for ward teaching, availability of reference material, student participation); (4) record keeping (cumulative record, records for guidance, use of records); (5) health and welfare program; (6) extracurricular or co-curricular program (social development, personal development, community participation, student-faculty government); (7) placement and follow-up (vocational study and adjustment, progress of students as evaluation of school program).

1/ Overview and outlines for distribution to class members.

Unit IV: Application of group findings to program of W
School of Nursing. Plan for securing continuity and coordina-
 tion of functions. Plans for continued study by the faculty.

Suggested General Readings

<u>Library #</u>	<u>Authors</u>	<u>Title</u>
	Bingham, W.V. and B.V. Moore	<u>How to Interview</u>
	Darley, J. G.	<u>Testing and Counseling in the High School Program</u>
	Greene, Edward B.	<u>Measurement of Human Behavior</u>
	Jones, Arthur J.	<u>Principles of Guidance</u>
	Koos, L.V. and G. W. Kefauver	<u>Guidance in Secondary Schools</u>
	Lefever, D, A. Tur- rell, and H.T. Weitzel	<u>Principles and Tech- niques of Guidance</u>
	Lloyd-Jones, Esther, and Margaret R. Smith	<u>A Student Personnel Program for Higher Education</u>
	National League of Nursing Education	<u>Curriculum Guide for Schools of Nursing, 1937</u>
	"	<u>Guide to Use of League Records, 1945</u>
	"	<u>Faculty Positions in Schools of Nursing and How to Prepare for Them</u>
	"	<u>Essentials of a Good School of Nursing</u>
	"	<u>Fundamentals of Adminis- tration for Schools of Nursing</u>

Unit IV: Application of group findings to program of School of Nursing. Plan for securing continuity and coordination of functions. Plans for continued study by the faculty.

Suggested General Readings

<u>Library</u>	<u>Authors</u>	<u>Title</u>
	Stigman, W.V. and B.V. Moore	<u>How to Interview</u>
	Barley, J. G.	<u>Testing and Counseling in the High School</u>
	Greene, Edward B.	<u>Measurement of Human Behavior</u>
	Jones, Arthur J.	<u>Principles of Guidance</u>
	Loos, I.V. and E. A. Betanover	<u>Guidance in Secondary Schools</u>
	Leisner, D. A. Jr., Wells, and H. T. Wetzel	<u>Principles and Tech- niques of Guidance</u>
	Lloyd-Jones, Arthur, and Margaret H. Smith	<u>A Student Personnel Manual for High Schools</u>
	National League of Nursing Education	<u>Curriculum Guide for Schools of Nursing, 1937</u>
	"	<u>Guide to Use of League Manual, 1937</u>
	"	<u>Health Education in Schools of Nursing and How to Prepare for It</u>
	"	<u>Principles of a Good School of Nursing</u>
	"	<u>Principles of Adminis- tration for Schools of Nursing</u>

<u>Library #</u>	<u>Authors</u>	<u>Title</u>
Contents: what it means, the importance of guidance.	National League of Nursing Education	<u>Guidance Programs for Schools of Nursing</u>
<u>Objectives:</u>	New York State Counselors' Association	<u>Practical Handbook for Counselors</u>
Understanding of student	Rogers, Carl R.	<u>Counseling and Psychotherapy</u>
Approval of proposed plan of study through application to	Ross, C. C.	<u>Measurement in Today's Schools</u>
Determination of background knowledge of	Spaulding, E. K.	<u>Professional Adjustments in Nursing</u>
Increase of knowledge of guidance through findings of experts.	Stewart, Isabel M.	<u>Education of Nurses</u>
Stimulation of interest to know more about its functions.	Strang, Ruth M.	<u>Counseling Techniques in Colleges and Secondary Schools</u>
Realization that education is continuous and stable.	"	<u>Personal Development and Guidance in Colleges and Secondary Schools</u>
Increased ability to apply learnings to	Traxler, Arthur B.	<u>Techniques of Guidance</u>
Development of a cooperative spirit of work together.	Triggs, Frances O.	<u>Personnel Work in Schools of Nursing</u>
Increase of appreciation of general background, personal and professional education as a basis for developing regard to personal work and guidance.	Wayland, M., R. L. McManus, and M. O. Faddis	<u>The Hospital Head Nurse</u>
<u>Questions for Study:</u> Present: In your own words define "Nursing." Do you feel that nursing is a profession? Should the record of individual students be discussed with the student and signed by both the instructor and the student? Why or why not? What is your understanding of the term "accidental record"? Should a student be allowed sick time during her nursing education period? Why or why not? Mary A. had poor grades in several subjects and had failed one written examination. She is a junior student and eager to do well.	Williamson, E. G.	<u>How to Counsel Students</u>

Unit I:

Content: Orientation to course; definition of guidance--what it means, how it functions; the history and background of guidance.

Objectives:

Understanding of proposed plan of study.

Approval of proposed plan of study through examination of its application to departmental and individual problems.

Determination of background knowledge of guidance.

Increase of knowledge of guidance through reference to writings of experts.

Stimulation of interest to know more about guidance and how it functions.

Realization that education is continuous and adjustment never static.

Increased ability to apply learnings to functional situations.

Development of a cooperative spirit of enterprise and ability to work together.

Increase of appreciation of general background and trends in personnel and guidance work in education, nursing, and nursing education as a basis for developing a philosophy with regard to personnel work and guidance.

Questions for Study and Discussion:

Pretest: In your own words define "Nursing."

Do you think proficiency record forms should be prepared through co-work of faculty and student?

Should the record of individual students be discussed with the student and signed by both the appraiser and the student? Why or why not?

What is your understanding of the term "anecdotal record"?

Should a student be allowed sick time during her nursing education period? Why or why not?

Mary R. has had poor grades in several subjects and has failed one midterm examination. She is a junior student and eager to do well.

Unit 1:

Content: Orientation to course; Definition of Guidance--
What it means, how it functions, its history and background
of Guidance.

Objectives:

Understanding of proposed plan of study.
Approval of proposed plan of study through examination of its
application in departmental and individual projects.
Determination of background knowledge of Guidance.
Increase of knowledge of Guidance through reference to writ-
ings of experts.
Stimulation of interest to know more about Guidance and how
it functions.
Realization that education is continuous and adjustment never
static.
Increased ability to apply learning to functional situations.
Development of a cooperative spirit in classwork and ability
to work together.
Increase of appreciation of general background and trends in
personnel and Guidance work in education, counseling, and man-
agement as a basis for developing a philosophy with
regard to personnel work and Guidance.

Questions for Study and Discussion

Protestant: In your own words define "Guidance."
Do you think professional persons should be
employed to guide co-workers of factory and students?
Should the record of individual students be dis-
cussed with the student and signed by both the
supervisor and the student? Why or why not?
What is your understanding of the term "vocational
counselor"?
Should a student be allowed to drop out during her
training education period? Why or why not?
Mary H. has had poor grades in several subjects
and has failed one mid-term examination. She
is a Junior student and seems to do well.

What steps would you take to help her improve-- and what do you think about the advisability of dropping her from the school?

Other questions to consider during this unit:

What is meant by the terms "guidance"--"personnel"--"personnel program"?

How many types of employment are open to graduate nurses?

Do dropped students ever become practical nurses? Does this present a hazard in nursing?

How close are your professional ties to the school from which you graduated?

Should students have enforced study hours?

If Elizabeth M. is capable of carrying the responsibility of caring for a patient acutely ill with pneumonia and complications, should she also be able to decide for herself how late she should stay out at night?

How many nurses that you know belong to nonprofessional clubs?

How much allowance is made for religious training and participation in religious activities for student nurses?

How many times within this past year have outside organizations been entertained in the nurses' residence?

Name some of the best known "funds" or "foundations" that have financially aided nursing?

How has the understanding of mental illness influenced nursing education?

Margaret G.'s family has moved to Idaho. She wishes to get a position there. How can she do this before arriving in Idaho?

Assignments:

Pretest taken in first class.

Individual assignment and written record of definition of "guidance" due second period.

What steps would you take to help her improve--
and what do you think about the availability of
dropping her from the school?

Other questions to consider during this unit:

What is meant by the terms "graduates"--"personnel"
program?

How many types of employment are open to graduate nurses?

Do dropped students ever become practical nurses? Does this
present a hazard in nursing?

How close are your professional ties to the school from which
you graduated?

Should students have enforced study hours?

It is unethical, is it not, to carry on the responsibility of
caring for a patient without being with them and completing
them. Should she also be able to decide for herself how late
she should stay out at night?

How many nurses that you know belong to nonprofessional clubs?

How much allowance is made for religious training and per-
ticipation in religious activities for student nurses?

How many times within this past year have outside organiza-
tions been entertained in the nurses' residence?

Have some of the best known "famous" or "legendary" that have
financially aided nursing?

How has the understanding of mental illness influenced nurs-
ing education?

Harriet L.'s family has moved to Idaho. She wishes to get
a position there. How can she go this before arriving in
Idaho?

Assignment:

Project taken in first class.

Individual assignment and written record of activities of
"Guidance" one second period.

Group report of findings of how the selected type of guidance is carried on in this school of nursing. Due third period.

Short report (written) on one of the following developments in nursing:

Tests and measurements in nursing

The extracurricular or co-curricular program in schools of nursing

Professional Counseling and Placement Service

Nursing Information Bureau

Publications of the American Nurses Association and

National League of Nursing Education

Work of the Grading Committee

Highlights of the Curriculum Guide for Schools of Nursing 1937

Vocational guidance for nurses

Due fourth period.

Suggested Readings for Unit I

<u>Library # or Issue</u>	<u>Author</u>	<u>Title and Page</u>
	Committee on Curriculum National League of Nursing Education	<u>Curriculum Guide for Schools of Nursing</u> Sect. I--Profes- sional Adjustments and Extracurricular Activities
	Harmer and Henderson	<u>Principles & Prac- tice of Nursing--</u> Chap. I
	Traxler, A. B.	<u>Techniques of Guid- ance</u>
<u>American Jour- nal of Nurs- ing</u> (April, 1937)	Bartholf, M.	"Student Personnel Work in Schools of Nursing," p. 447
" (August, 1944)	Bernard, Rose K.	"A Guidance Program in a School of Nursing," pp. 774-779
" (May, 1945)	Bernays, E. L.	"The Nursing Profes- sion--A Public Re- lation's Viewpoint," pp. 351-354

Group report of findings of how the selected type of guidance is carried on in this school of nursing. Two third period.

Short report (written) on one of the following developments in nursing:

Tests and measurements in nursing
The experimental or co-operative program in schools of nursing

Professional Counseling and Placement Services
Nursing Information Bureau

Publications of the American Nurses Association and
National League of Nursing Education

Work of the Grading Committee
Highlights of the Curriculum Guide for Schools of Nursing

1937

Vocational guidance for nurses

The fourth period.

Suggested Readings for Unit 1

Library & or leave	Author	Title and Date
	Committee on Curriculum National League of Nursing Education	Curriculum Guide for Schools of Nursing 1937, 1-1-1937
	Barrett and Henderson	Principles of Nursing 1937, 1-1-1937
	Franklin, A. B.	Techniques of Guid- ance
American Jour- nal of Nurs- ing (April) 1937	Barthol, W.	"Student Personnel Work in Schools of Nursing" p. 447
"	Harvard, Rose K.	"A Guidance Program in a School of Nursing" p. 447
" (May, 1938)	Barthol, W. L.	"The Nursing Profes- sion - A Guide to Inter-relationships" p. 447-454

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	National League of Nursing Education	List of Schools meeting minimum requirements set by law and board rules in various states and territories
	"	<u>Essentials of a Good School of Nursing</u>
	"	<u>New Frontiers in Psy- chiatric Nursing</u>
	Nursing Informa- tion Bureau	<u>Nursing: A Profession for College Women</u>
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<u>Modern Hospital</u> (Oct., 1943)	Cunningham, Robert	"What Says to the Nurse at Hospital," pp. 43-5
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<u>Hospital</u> (Feb., 1945)	Gorham, Nellie	"What is Future Role of Hospital in Nurse Education," pp. 58-9
<u>American Journal of Nursing</u> (Nov., 1945)	Keller, Catherine	"Concept of Supervisory Administration," pp. 1040-1041
	National League of Nursing Education	List of Schools Meeting Minimum Requirements set by law and board rules in various states and territories
		<u>Annals of a Good Hospital of Nursing</u>
		<u>See Hospital in Child's World</u>
	<u>Training Informa- tion Bureau</u>	<u>Training & Protection for College Women</u>
	National League of Nursing Education	<u>Training & Protection in Child's World</u>
	Minnesota State Dept. of Educ.	<u>Training & Protection in Child's World</u>
<u>American Journal of Nursing</u> (Dec., 1945)	Inslow, G.A.	"Recent Trends in Public Health and Nursing," pp. 502-503

Unit II:

Content: Study of characteristics of a guidance program; outline of techniques used in an effectively functioning program; examination of techniques and application of them to nursing situations.

Objectives:

Understanding of what comprises a guidance program.

Relation of familiar and past experiences in guidance to present and future uses.

Increased ability to discern individual differences by study and application of techniques of guidance.

Increased understanding of how to go about developing and practicing guidance in a school of nursing.

Location and identification of the major personnel and counseling problems with which the nursing profession is especially concerned.

Questions and Problems for Study and Discussion:

Is the new philosophy of nursing education representative of your thinking?

Recall the guidance you received during training years.

State problems which were present during your nurse's training period. How were these solved?

How would pre-planned guidance program function in the following problems? What techniques could be used in solving these problems?

Mary J. reports off duty because of painful feet. Examination of her shoes show that they are ill-fitted. The student has corns and calluses and an infection between her toes.

Mona L. never can seem to finish her ward assignments.

Evelyn U. is assigned to duty in the nursery. Instead of taking the temperature of each baby she writes in an approximate figure.

Unit II:

Content: Study of characteristics of a guidance program; outline of techniques used in an effectively functioning program; examination of techniques and application of them to nursing situations.

Objectives:

Understanding of what comprises a guidance program.
 Relation of familiar and past experiences in guidance to present and future work.
 Increased ability to discuss individual differences by study and application of techniques of guidance.
 Increased understanding of how to go about developing and practicing guidance in a school of nursing.
 Location and identification of the major personnel and socializing problems with which the nursing profession is especially concerned.

Questions and Problems for Study and Discussion:

Is the new philosophy of nursing education representative of your thinking?
 Recall the guidance you received during training years.
 List problems which were present during your nurse's training period. How were these solved?
 How would you plan a guidance program for the following problems? What techniques could be used in solving these problems?
 Mary J. reports old-duty because of personal loss. Examination of her shows that they are ill-fated. The student has some and selfishness and an infection between her toes.
 How I never can seem to finish her work assignments.
 Explain I. is needed in duty in the nursery. I must be taking the responsibility of each baby and write in an appropriate figure.

Margaret P. is a junior student and expresses a desire to withdraw from the school because she is disillusioned about nursing.

Eleanor J. received a failing grade in one of the pre-clinical subjects.

Emma G. wants to go on to be a teacher of nursing. Her mother insists that she come live at home and do private duty.

Suggested Reference Readings

<u>Library # or Issue</u>	<u>Author</u>	<u>Title and Page</u>
	Bingham and Moore	<u>How to Interview</u>
	Greene, E.B.	<u>Measurement of Human Behavior</u>
	Lloyd-Jones and Smith	<u>Student Personnel Programs</u>
	New York State Counselors Association	<u>Practical Handbook for Counselors</u>
	Rogers, C.R.	<u>Counseling and Psychotherapy</u>
	Strang, R.M.	<u>Counseling Techniques in Colleges and Secondary Schools</u>
	Traxler, A.B.	<u>Techniques in Guidance</u>
	Triggs, F. O.	<u>Personnel Work in Schools of Nursing</u>
<u>American Journal of Nursing</u> (Sept., 1943)	Abbot, W.	"The Anecdotal Behavior Record," pp. 928-933
" (Dec., 1940)	Aul, H.L.	"Nursing Aptitude Tests," p. 1358
<u>Journal of Applied Psychology</u> (June, 1944)	Bennett and Gordon	"Personality Scores and Success in Fields of Nursing," pp. 267-78

Harpard F. is a junior student and expresses a desire to withdraw from the school because she is dissatisfied about nursing.

Blissard J. received a failing grade in one of the pre-clinical subjects.

King J. wants to go on to be a teacher of nursing. Her mother insists that she come live at home and do private duty.

Suggested Reference Readings

Library of Congress	Author	Title and Date
	Hingham and Moore	How to Interview
	Greene, E. J.	Measurement of Human Personality
	Lloyd-Jones and Welch	Student Personal Program
	New York State Commissioners Association	Practical Handbook for Nurses
	Hogers, E. H.	Personality and Psycho- therapy
	Strong, E. M.	Counseling Techniques in Colleges and Secondary Schools
	Traxler, A. B.	Techniques in Guidance
	Tracy, F. G.	Personal Work in Schools of Nursing
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(Feb., 1943)	Ali, E. S.	"Nursing Attitude Tests," p. 1538
Journal of the American Nurses (June, 1943)	Benett and Gordon	"Personality Types and Success in Field of Nursing," pp. 487-49

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Nursing Education Bulletin (March, 1933)	Bregman, E.O.	<u>Performance of Student Nurses on Tests of Intelligence</u>
<u>Journal of Applied Psychology</u> (Oct., 1943)	Crider, B.	"A School of Nursing Selection Program," pp. 452-457
<u>Educational Re- sources Bulletin</u> (Feb., 1939)	Crust, A.L.	"Ohio State Coopera- tive Testing Program in Nursing Education," pp. 31-39
<u>American Journal of Nursing</u> (June, 1945)		"Guarding Student Ex- perience", p. 464
" (April, 1946)	Holeman, L.	"Faculty-Student Par- ticipation in Civic and Professional Activities," pp. 254-257
Educ. Bulletin #14		"Proper Use of Intel- ligence Tests"
<u>American Journal of Nursing</u> (April, 1946)		"Information about N.L.N.E. Tests"
" (May, 1946)	American Nurses Association Research Dept.	"Kuder Preference Record in the Coun- seling of Nurses," pp. 312-316
" (Oct., 1943)	Leahy, K.	"Can Drop-outs Be Salvaged?" pp. 897- 898
" (May, 1941)	McClelland and McManus	"Appraising Personality-- the Use of Anecdotal Records in Appraising Personality Traits," pp. 579-584

<u>Library # or Issue</u>	<u>Author</u>	<u>Title and Page</u>
<u>American Journal of Nursing</u> (Jan., 1943)	Shetland, Margaret	"Analyzing Personal Resources," pp. 665- 668
" (Feb., 1944)	Sommer, Ida B.	"The Pre-Nursing and Guidance Test Service," pp. 158-164
" (June, 1945)	Triggs, F. O.	"A Nation-wide Coun- seling and Placement Service," pp. 467- 468
" (June, 1943)	Triggs and Bigelow	"What Student Nurses Think about Coun- seling," pp. 670-673

Unit III:

The content of this unit will be explored by group project. Each group will select problems of specific interest--explore these areas--and present findings to class by statement of problems--statement of present practices and suggested practices.

Content: Problems and how they are met in

1. Securing desirable applicants for nursing
2. Orientation and educational advisement
3. Clinical situational problems
4. Affiliation planning
5. Record keeping
6. Health and welfare program
7. Placement and follow-up.

Questions and Problems for Study and Discussion:

What are some of the present practices of recruitment?

How do the findings of the Bernay's reports affect recruitment plans?

Should schools of nursing advertise for students?

What is meant by "orientation"?

Make a outline of a plan for selection of students.

List criteria for a program of studies and student handbook.

Where shall records be kept and who should have access to them? What precautions should be taken?

Why do some wards have difficulty in planning for ward teaching programs? How can these difficulties be overcome?

Outline a health and welfare program.

Should a "chiropracist" be employed as part of a hospital project?

Where should plans for co-curricular activities originate?

Should the study of cultural areas and hobbies be included as part of the curriculum?

Can a follow-up program be pre-planned?

Who is responsible for such a program in this hospital?

Is alumni contact sufficient to hold interest of past students?

Does the progress of a school's graduates give any indication of quality of school program?

Suggested Readings

<u>Library # or Issue</u>	<u>Author</u>	<u>Title and Page</u>
	National League of Nursing Education	<u>Curriculum Guide for Schools of Nursing 1937</u>
<u>American Journal of Nursing</u> (Sept., 1943)	Abbot, Reid and Smith	"The Anecdotal Behavior Record," pp. 928-933
" (May, 1945-46)	Bernays, E. L.	Series of articles on public relations and nursing
<u>Hospital Manage- ment</u> (May, 1946)	Bondi, Leon	"More Effort Needed to Get Student Nurses," pp. 74-76
<u>Trained Nurse and Hospital Review</u> (Jan., 1946)	Brannigan, F.	"The Hospital Nurse Speaks Up", 1945
<u>Hospital Manage- ment</u> (May, 1946)	Brent, K. A.	"Advertising for Student Nurses," pp. 70-74
" (Feb., 1946)	"	"What State Nurses As- sociations Are Doing about Personnel Prac- tices"
" (May, 1946)	"	"California Nurses Picket to Force Union Recogn- ition," p. 92

<u>Library # or Issue</u>	<u>Author</u>	<u>Title and Page</u>
<u>Public Health Nursing Reprint</u>	Clark, Dean A.	"Nursing in Vocational Rehabilitation"
	National League of Nursing Education	<u>Clinical Courses Available for Graduate Professional Nurses</u>
<u>American Journal of Nursing</u>	Carrington, M.	"Planning for Affiliations"
" (July, 1945)	Cunningham, F.N.	"Student Handbook in Ori- entation Program," pp. 561-563
" (July, 1940)	Crist, Alice	"Measuring Student At- tainment"
	Nursing Informa- tion Bureau	<u>Educational Funds Availa- ble for Student Nurses</u>
<u>Modern Hospital (April, 1946)</u>	Faxon, Nathaniel	"New Venture in Nurse Education," pp. 52-55
<u>American Journal of Nursing (Jan., 1946)</u>	Fillmore, Anna	"Its Your Career--Why Not Plan for It?" pp. 36-39
" (April, 1938)	Hart, Joseph K.	"Economic Security for Nurses through Trade Unionism or ?"
" (Dec., 1945)	Henderson, Jean	"One Blueprint for Re- cruitment," pp. 1002-4
" (April, 1946)	Holeman, Lois H.	"Faculty-Student Partici- pation in Civic and Professional Activi- ties," pp. 254-257
" (Oct., 1942)	Honsdon, Mary	"Some Aspects of A College Health Service," pp. 1183-1189
" (May, 1946)	American Nurses Association Research Dept.	"Kuder Preference Record in Counseling Nurses," pp. 312-316

<u>Library # or Issue</u>	<u>Author</u>	<u>Title and Page</u>
U.S. Office of Education Bulletin #25	Leonard, E. and Tucker, A.	<u>The Individual Inventory in Guidance Programs in Secondary Schools</u>
<u>Teachers College Record</u> (May, 1944)	McManus, R.L.	"Vocational Counseling in Relation to Nursing," pp. 532-542
<u>American Journal of Nursing</u> (March, 1946)	McKowan, Harry	"The Student Council"
	National League of Nursing Education	<u>Curriculum Guide for Schools of Nursing, 1937,</u> "The Extra-Professional Program," pp. 533-553
National League of Nursing Education Report, 1939 (Sept., 1943)	Petry, L.	"Social and Cultural Aspects of the Extra- Professional Program" pp. 194-196
	Nat'l Organiza- tion Public Health Nursing Pamphlet	<u>Nurse in Industrial Field</u>
	Joint Orthopedic Nat'l Advisory Service	<u>Nurse in Orthopedic Field</u>
	National League of Nursing Education	<u>Nursing Education in War- time, Bulletins #1-14,</u> "Student Personnel Pro- gram," "Selection of Students"
	American Nurses Association 1944	<u>Personnel Practices for Graduate Staff Nurses</u>
<u>American Journal of Nursing</u> (May, 1941)	Potts, E.M.	"Selection of Student Nurses," pp. 590-597

<u>Library # or Issue</u>	<u>Author</u>	<u>Title and Page</u>
<u>Occupations</u> (March, 1945)	Potts, E.M.	"Testing Prospective Nurses," pp. 328-334
<u>Public Health Nursing</u> (Jan., 1942)		"Recommended Qualifications for P.H.N. Personnel," pp. 24-28
<u>American Journal of Nursing</u> (Jan., 1946)	Rundquist, M.T.	"A Summer Home for Student Nurses," pp. 16-17
<u>National League of Nursing Education Publication</u> 1935	Spaulding, E.K.	<u>A Suggested Program of Vocational Guidance for Schools of Nursing</u>
<u>American Journal of Nursing</u> (Sept., 1945)	U.S. Public Health Service Dept. of Research	"A Health Program for Student Nurses," pp. 736-740
" (Sept., 1945)	"	"Practices in Nursing School Health Programs" p. 740
" (1944)	"	"Student Withdrawals," p. 586
<u>Hospitals</u> (May, 1946)	Wilson, L. and Whiteside, G.	"The Nurses Residence Is Important," pp. 45-47

Unit IV:

The application of findings of group studies to the program of the W_____ School of Nursing. Plan for securing continuity and coordination of function. Organization plan for guidance. Plan for continued study by faculty.

Objectives:

1. To apply findings to present program in a workable or practical manner.
2. To produce, as a result of group thinking, a continuous program that will provide effective guidance.
3. To evaluate this proposed program in light of available criteria.
4. To set up plans to carry out this program.
5. To begin operation of program and to plan definitely for its constant re-evaluation.

Questions:

1. Must a student always be aware of being "guided"?
2. What areas could be included in group guidance? Who should conduct these meetings?
3. How does a guidance program compare with a public relations program? Is it a part of the public relations program?
4. List the desired outcomes of the guidance program you are proposing.
5. Does the program need a director or coordinator? What would be the responsibilities of such a person? Where is relative position in organization plan?

Assignment:

Appraise the scope and status of proposed program of guidance by use of check list (copies of which have been distributed).

Write a concise summary of the work of the faculty this year and suggest areas of interest or need for future faculty study.

Suggested References

<u>Library #</u>	<u>Author</u>	<u>Title</u>
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	Traxler, A.	<u>Techniques of Guidance,</u> <u>Chs. XI, XII</u>
	National League of Nursing Education	<u>Essentials of a Good</u> <u>School of Nursing,</u> <u>"Plan of Organization,</u> <u>1945"</u>
	Science Research Association	<u>Practical Handbook for</u> <u>Counselors, Chs. XV,</u> <u>XVI, XVIII</u>

CHAPTER IV

CONCLUSIONS AND RECOMMENDATIONS

Conclusion

In the present years of nursing when the profession is expanding, developing, and going through a period of crisis, the need for guidance among its present members and in nursing schools is very evident.

The changing emphases in nursing education and the expansion of nursing into new fields must be accompanied by a provision for re-education of attitudes in the faculties in the present schools or restrict the education of nurses to institutions of learning where there are specially prepared teachers. The 1946 list of State-Accredited Schools of Nursing indicates that as of the beginning of the year there were 1,271 state-accredited schools; seventy-seven of these schools report college or university control.^{1/}

The agreement with regard to the need and the justification of a guidance program in schools of nursing is rapidly becoming widespread. Action is indicated along the lines of (1) planned pre-nurse education, (2) recruitment of students, (3) selection of students with aptitudes, attitudes, and

^{1/}State-Accredited Schools of Nursing, 1946, National League of Nursing Education, New York, pp. 3-4.

interests necessary to a nurse, (4) educational guidance that stimulates continuous mental and emotional growth, (5) personal and social guidance that develops security, stability, and participation in community activities, (6) vocational guidance within nursing so that the student nurse may graduate prepared to meet the needs of society and to continue to progress professionally to a known goal or in a known direction.

This type of program cannot be introduced or carried on effectively if all those concerned are not aware of and in agreement with its purpose. In nursing schools as they are today this introduction must begin and continue until the guidance concept permeates the entire staff and student group. One suggestion for its accomplishment is the staff in-service education program in which the key group, the faculty, can be stimulated to study, understand, and recognize problems of guidance and develop from within so that a planned program for their school emerges as a result of their own thinking. The program must not be superimposed but could be an outgrowth of their own learning and experience and strengthened by increased knowledge and use of techniques of guidance.

The questionnaire study presented in this paper seems to indicate clearly the need for guidance in nursing. The suggested in-service program for the introduction of guidance into a school of nursing has never been actually tried out in the form presented. It is written after several years of

experience with students, head nurses, and efforts to establish ward teaching programs with the present type of ward personnel.

Nursing as a community service is non-expendable. Every effort must be made to keep in step with the dynamic and changing ways of civilization.

Recommendations for Further Study

1. The development of guidance programs within schools of nursing should be reported and results compared.
2. Preparation and qualifications for the nurse counselor and guidance director should be studied and refined to meet the needs of the profession.
3. Functions of the nurse counselor and guidance director should be defined for use in the school of nursing.
4. The use of guidance techniques should be considered more thoroughly for the benefit of graduate nurses.

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